

AC 44141

EAST SUSSEX COUNTY COUNCIL.

ANNUAL REPORT

UPON THE

HEALTH & SANITARY CONDITION OF THE COUNTY,

For the Year ended 31st December, 1934,

BY

R. ASHLEIGH GLEGG, M.D., D.P.H.,

County Medical Officer of Health,

Chief Tuberculosis Officer and School Medical Officer.

HASTINGS :

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East Sussex County Council.

*Public Health Department,
County Hall, Lewes.*

With the

*Compliments of the County Medical
Officer of Health.*

A faint, light-colored watermark of a classical building with four columns and a triangular pediment is visible in the background.

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TO THE CHAIRMAN AND MEMBERS OF THE EAST SUSSEX COUNTY COUNCIL.

MR. CHAIRMAN, MY LORD, LADIES AND GENTLEMEN, ·

I have the honour to submit my Seventh Annual Report, and the fortieth of the series, on the Health of the Administrative County of East Sussex relating to the calendar year 1934.

WHOLE-TIME MEDICAL OFFICERS OF HEALTH.

The County Council completed during the year under review their arrangements under Section 58 of the Local Government Act, 1929, for securing the appointment of whole-time Medical Officers of Health for County Districts, and by the end of the year all the County Districts, except the Borough of Rye and the Urban District of Newhaven, had appointed medical officers who, by the terms of their appointment, were restricted from engaging in private practice as medical practitioners.

NEW COUNTY DISTRICTS.

The review of County Districts undertaken under Section 46 of the same Act altered the boundaries of the majority of both the urban and rural districts, abolished the urban districts of Battle and Uckfield, amalgamated the urban districts of Cuckfield and Haywards Heath, and reduced the number of rural districts from eleven to five. The urban and rural districts as now constituted with their populations and names of their medical officers of health are given on page 6 of this Report. The increased rateable value of the new rural districts should enable the Rural District Councils to provide more easily the services and technical staff necessary to maintain a high standard of public health.

This Report records the work undertaken by the County Council for the benefit of the inhabitants of the Administrative County under the Acts, Orders and Regulations which provide for maternity and child welfare, for the prevention and treatment of tuberculosis and venereal disease, and for other matters relating to the physical and mental health of the community.

MINISTRY'S SURVEY REPORT.

The whole of the work of the County Health Service was the subject of a comprehensive inspection by officers of the Ministry of Health in 1933 and 1934, the result of which was submitted by them in a Survey Report to the Minister of Health. The Minister's observations based on this Survey Report were received and considered by the Council during the year.

He stated that he was glad to note the good work which was being done in many branches of the Maternity and Child Welfare Service and expressed himself as satisfied that a reasonable standard of efficiency and progress had been attained in the discharge of other public health functions. He particularly referred to the desirability of giving effect to the intention of the Local Government Act, 1929, by making provision for the sick, including hospital provision, under the Public Health Acts, rather than under the Poor Law Act, and indicated the desirability of the Council undertaking measures for the instruction of the public in health matters.

MILK AND THE PUBLIC HEALTH.

The need for an improvement in the purity and quality of the nation's milk supply was recognised more fully in 1934 by all concerned with public health and agriculture. In this County a Conference of Public Health and Agricultural Officers of the County Council with District Medical Officers of Health and Sanitary Inspectors, was held in the month of June, 1934, and was well attended. At this Conference the whole subject of the hygiene of the production of milk was reviewed and the proposals of the Milk Marketing Board for the establishment of an Accredited Producers' Scheme were discussed. The Scheme, as at first drawn up, was not received with general approval by the Authorities, and later it was withdrawn in favour of another, under which the Milk Marketing Board agreed to pay a premium to producers who, having fulfilled the conditions laid down by the Milk (Special Designations) Order, 1923, hold a licence for the production of "Grade A" milk.

The offer of a monetary reward to dairy farmers if they comply with conditions ensuring a reasonable standard of cleanliness in the milk produced by them is likely to result in a great improvement in the quality of this essential food in so far as it is supplied by Accredited Producers. There is, however, a very real danger associated with this scheme which must be guarded against by the Public Health Authority. Dairy farmers who are not accredited producers will be likely to purchase animals rejected from the accredited producers' herds and will, therefore, require closer supervision than before, both in respect of veterinary inspection and sampling, to safeguard the public supplied by them.

ADEQUACY OF THE COUNTY'S WATER SUPPLY.

A Joint Advisory Committee on Water Supplies in the County was appointed during the year. It consisted of representatives of all the Local Authorities and of the principal Water Undertakers

for the County of East Sussex. This Committee investigated and reported upon the water resources in the County, which were considered in general to be sufficient and satisfactory, except in the eastern area, where there was found to be a need for definite action to improve existing supplies.

HEALTH EDUCATION AND TUBERCULOSIS AFTER-CARE.

A series of lectures to nurses and health workers on the care of infants and young children was given in 1934 in four centres in the County through the agency of the Pilgrim Trust Fund. Addresses on social hygiene to teachers, parents and leaders of youth movements were given during the year through the Rural Community Council. That Council completed, in 1934, the organisation of Tuberculosis Care Committees, which now provide a satisfactory service throughout the County. At the close of the year an extension of the work of these Committees was under consideration with a view to their functioning as Children's Care Committees in co-operation with the Education Committee. The County Council have recognised the value of the Tuberculosis Care Committees' work by making a grant towards their expenses.

HOSPITAL ACCOMMODATION.

The County Council have appointed a Committee to review the hospital and institutional accommodation available in the County, including the provision in these respects for children. The Committee met and instructed the County Medical Officer to prepare a report for their consideration, giving particulars of the existing accommodation. This report was in preparation at the end of the year. Information will be submitted as to the provision made throughout the County by Voluntary Hospitals and by the County Council through the Public Assistance Committee, with statistics of the use made of the accommodation and evidence of the extent of the need for such accommodation for various classes of disability.

VITAL STATISTICS.

Statistics relating to the births and deaths in the County, and of the prevalence of infectious disease, will be found at the commencement of this Report.

The deaths in East Sussex still outnumber the births, but the birth rate shows a slight improvement. It is particularly satisfactory to be able to record that the death rate of infants under one year of age in 1934 was the lowest ever recorded in the Administrative County. Knowledge of the causes of these deaths, occurring on the very threshold of life, indicates that it is through ante-natal care of the mothers, with especial reference to their nutrition, that we can look for their prevention. Until, however, the principles of eugenics are understood and are generally acted upon, much further decline in this mortality cannot be expected. An effort on eugenic lines was made by the initiation during the year of clinics for giving contraceptive advice to married women in whose cases pregnancy would be seriously detrimental to their health.

GENERAL ADMINISTRATION.

It will be seen from the list of members of the staff of the Health Department that the number is small in proportion to the extent of the work undertaken. This is due to the Council's policy of making the maximum use of voluntary agencies in the administration of Social Services. Thus the health visiting of infants is carried out by nurses employed by the Voluntary District Nursing Associations instead of by whole-time officers. The domiciliary service for the blind and for other classes of disability is provided by voluntary associations assisted by grants in aid of their work. Representatives of the County Council, together with the County Medical Officer, serve on the Committees of these associations. Considerable advantage is derived from combining voluntary service with official direction and no administrative difficulty has been experienced from the arrangement.

I wish to express thanks to the Council for the consideration given to my Reports and also to the staff of the Health Department for their loyal and efficient service throughout an arduous year. The appointment by the County Council in 1930 of a County Health Inspector has been amply justified by the valuable work undertaken and technical assistance given by Mr. Jessop each year since his appointment. I am also indebted to the Medical Officers of Health and Sanitary Inspectors throughout the Administrative County for their friendly co-operation.

I am,

Your obedient Servant,

R. ASHLEIGH GLEGG,

*County Medical Officer of Health and
School Medical Officer.*

PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
LEWES.

31st August, 1935.

MEMBERS OF COMMITTEES, 1934-1935.
THE PUBLIC HEALTH AND HOUSING COMMITTEE.

Lt.-COL. R. S. CLARKE.	MR. C. J. HONISSETT.
CAPT. C. H. COTESWORTH.	MR. A. TURNER LAING.
COL. P. DEE.	MR. H. W. LOOKER.
CAPT. C. F. GARDNER.	MRS. C. I. MEADS.
MR. C. HALES.	MR. F. H. NIAS.
MISS A. E. HALL.	MR. H. F. PARKER.
MISS M. M. HAMPTON.	LADY RICHMOND.
MR. J. L. P. W. HEWISON.	MR. B. SPRING RICE.
MR. A. W. HILLMAN	MR. P. LENNOX WRIGHT (Chairman).

Ex-officio: The Chairman of the County Council—Col. H. I. Powell Edwards, D.S.O., and the Vice-Chairman of the County Council—Lt.-Col. R. V. Gwynne, D.S.O

THE MATERNITY AND CHILD WELFARE COMMITTEE.

Chairman—LADY RICHMOND.

The Members of the Public Health and Housing Committee with the addition of the following:—

MISS M. S. HOLGATE.	MRS. SHOESMITH.
MRS. M. A. SHIRLEY.	MRS. R. L. THORNTON.
MR. A. E. CAWSTON, M.R.C.S.	

THE COMMITTEE FOR THE CARE OF THE MENTALLY DEFECTIVE.

(Members of the County Council).

MR. J. T. BRIDGER.	MRS. C. I. MEADS.
MR. H. C. BURRA.	MR. O. H. SWANN.
MR. C. H. S. ELLIS.	MR. R. WHITTINGTON, M.D. (Chairman).
MISS A. E. HALL.	MR. P. LENNOX WRIGHT.
MISS M. M. HAMPTON.	

(Co-opted Members.)

MISS M. BEALE.	MRS. M. H. OWEN.
*COL. P. DEE.	DR. FRANKLYN PEARSE.
MRS. C. F. GARDNER.	MR. F. SPRING WATTS.
*MR. A. N. INNES.	

**(Also Member of County Council).*

STAFF OF COUNTY PUBLIC HEALTH DEPARTMENT.

County Medical Officer of Health, School Medical Officer, and Chief Tuberculosis Officer.	R. Ashleigh Glegg, M.D., Ch.B., D.P.H.
Deputy County Medical Officer of Health, and Chief Clinical Tuberculosis Officer	Arthur Beeley, M.Sc., M.D., B.S., M.R.C.S., L.R.C.P., D.P.H.
Assistant School Medical Officer (part time)	Walter R. Dunstan, M.Sc., M.B., M.R.C.S. L.R.C.P., D.P.H.
" " " " " "	Sir Alan Hilary Moore, Bart., M.B., B.Ch., D.P.H.
" " " " " "	William Gillitt, C.I.E., M.D., M.R.C.S., L.R.C.P. D.P.H.
" " " " " "	William B. Stott, L.R.C.P. & S., D.P.H.
" " " " " "	R. Sydney Davidson, M.R.C.S., L.R.C.P., D.P.H.
Consultant for Physical Treatment (part time)	Surgeon-Commander G. Murray-Levick, R.N., M.R.C.S. L.R.C.P.
Orthopaedic Surgeon (part time)	G. K. McKee, M.R.C.S., L.R.C.P.
Medical Superintendent of County Sanatorium for Tuberculosis, Robertsbridge.	John R. Dingley, M.B., B.S., M.R.C.S., L.R.C.P.
Assistant Medical Superintendent of County Sanatorium for Tuberculosis, Robertsbridge	Mrs. Ruth Dingley, M.A., M.D., M.R.C.S. L.R.C.P.
Medical Superintendent of Southlands Hospital and Assistant County Medical Officer (Institutions).	E. Bruce Low, M.B., B.Ch., D.P.H.
Assistant Medical Officer, Southlands Hospital	C. F. Lynch, M.B., B.Ch., D.P.H. (Resigned 5th November, 1934).
" " " " " "	N. D. Matson M.R.C.S., L.R.C.P., (Resigned 27th October, 1934).
Assistant Clinical Tuberculosis Officer (part time)	N. E. Chadwick, M.A., M.D., M.B., B.Ch., M.R.C.S., D.P.H.
" " " " " "	Sir Alan Hilary Moore, Bart., M.B., B.Ch., D.P.H.
Consulting Throat Surgeon at Sanatorium ..	Gilbert Howells, F.R.C.S.
Consulting Orthopaedic Surgeon at Sanatorium ..	N. St. John J. G. D. Buxton, M.B., B.S., F.R.C.S., L.R.C.P.
Consulting Surgeon at Sanatorium ..	Derrick J. Martin, M.B., B.S., F.R.C.S., L.R.C.P.
County Dental Surgeon	Arnold Court, L.D.S., R.C.S.
" " " " " "	Wilfred Eddings, L.D.S., R.C.S.
Dental Surgeon at Sanatorium (part time) ..	G. J. S. Rose, L.D.S., R.C.S.
County Health Inspector	K. F. Pedley, L.D.S., R.C.S.
Chief Clerk	H. Jessop.
	George F. Akehurst.

Inspector of Midwives and Superintendent of the East Sussex County Nursing Federation	Miss E. M. Wyatt, M.B.E., A.R.San.I., S.R.N., S.C.M.
District Nursing Superintendent	Miss A. Brown, S.R.N., S.C.M.
" " "	Miss A. Griffiths, S.R.N., S.C.M. (Relinquished duty August, 1934.)
" " "	Miss H. E. Hall, S.R.N., S.C.M. (Resigned August, 1934.)
" " "	Miss C. Higginson, S.R.N., S.C.M.
" " "	Miss C. M. McGregor, S.R.N., S.C.M., (Appointed October, 1934.)
" " "	Miss A. G. Mitchell, S.R.N., S.C.M. (Resigned May, 1934.)
" " "	Miss E. M. Pinyon, S.R.N., S.C.M. (Appointed July, 1934.)
" " "	Miss F. M. Smith, S.R.N., S.C.M. (Appointed September, 1934.)
Orthopaedic Nurse	Miss G. M. K. N. Lindop, C.S.M.M.G.
Home Visitor under Mental Deficiency Acts to Feeble-minded Children	Mrs. G. F. Ayshford Ayre.
Analyst under the Sale of Food and Drugs Acts	
Inspectors of Weights and Measures—	Samuel Allinson Woodhead, D.Sc., F.I.C.
Lewes District, No. 215	William Chamberlain.
Rye District, No. 216	John J. Murphy.
County Veterinary Inspector	D. Johnston, M.R.C.V.S.
" " "	G. F. Pickering, M.R.C.V.S.

SANITARY DISTRICTS, 1934.

DISTRICT.	Census Population		Population Estimated by Registrar General 1934.	MEDICAL OFFICER OF HEALTH.
	1921.	1931.		
BOROUGHS—				
BEXHILL ...	20,363	21,229	21,670	(a) Wm. Gillitt, C.I.E., M.D., M.R.C.S., L.R.C.P., D.P.H.
HOVE ...	47,507	54,993	57,870	Norman E. Chadwick, M.A., M.D., M.B., B.Ch., M.R.C.S., D.P.H.
LEWES ...	10,946	10,993	11,790	Walter R. Dunstan, M.Sc., M.B., M.R.C.S., L.R.C.P., D.P.H.
RYE ...	4,033	4,058	4,068	Thomas Tomkinson Harratt, M.R.C.S., L.R.C.P.
URBAN DISTRICTS—				
BURGESS HILL ...	5,851	6,281	6,700	(b) Wm. B. Stott, L.R.C.P. & S., D.P.H.
CUCKFIELD ...	10,334	11,298	12,736	(b) Wm. B. Stott, L.R.C.P. & S., D.P.H.
EAST GRINSTEAD	8,106	8,728	9,255	(d) R. S. Davidson, M.R.C.S., L.R.C.P., D.P.H.
NEWHAVEN ...	6,829	7,381	7,082	Rodie Parkhurst, M.B., C.M.
PORTSLADE-BY-SEA	8,219	9,527	10,010	Norman E. Chadwick, M.A., M.D., M.B., B.Ch., M.R.C.S., D.P.H.
SEAFORD ...	7,301	6,925	8,283	Walter R. Dunstan, M.Sc., M.B., M.R.C.S., L.R.C.P., D.P.H.
RURAL DISTRICTS—				
BATTLE ...	25,508	27,839	28,991	(c) Sir Alan Moore, Bart., M.B., B.Ch., D.P.H.
CHAILEY ...	13,005	16,167	16,547	Walter R. Dunstan, M.Sc., M.B., M.R.C.S., L.R.C.P., D.P.H.
CUCKFIELD ...	21,710	22,822	23,432	(b) Wm. B. Stott, L.R.C.P. & S., D.P.H.
HAILSHAM ...	27,446	30,213	31,510	Wm. Gillitt, C.I.E., M.D., M.R.C.S., L.R.C.P., D.P.H.
UCKFIELD ...	39,133	38,341	37,956	(d) R. S. Davidson, M.R.C.S., L.R.C.P., D.P.H.
PORT SANITARY AUTHORITIES—				
NEWHAVEN ...	—	—	—	Rodie Parkhurst, M.B., C.M.
NEW SHOREHAM	—	—	—	W. J. Butcher, M.R.C.S., L.R.C.P., D.P.H.

(a) Dr. N. Dunscombe resigned his office as Medical Officer of Health for the Borough of Bexhill in May, 1934.

(b) Appointed 1st August, 1934. (c) Appointed 1st July, 1934. (d) Appointed 1st November, 1934.

AREA AND POPULATION.

The Administrative County of East Sussex is 507,069 acres in extent (35,496 acres in Urban and 471,573 in Rural Districts). There are 143 civil parishes, of which seven are situated within the Boroughs. The rateable value for the whole of the Administrative County, as on the 1st April, 1934, was £2,714,048 and the product of a rd. rate was estimated at £10,412. Within the Administrative County there are the two Port Sanitary Authorities of Newhaven and New Shoreham. Apart from agriculture the County has few industries and is mainly residential in character. For the purpose of calculating the Vital Statistics for the year in districts in which changes in boundaries have occurred the Registrar General has supplied a modified population figure for each altered district and has combined the records of the former areas for the whole year and the records of the transferred portions of the areas for the part of the year subsequent to the date of change. The modified population figures differ from the normal estimates of population given in the following Tables.

CHIEF VITAL STATISTICS FOR THE YEAR 1934.

TABLE I.

Group.	Population estimated by Registrar General 1934.	Live Births.		Deaths.		Infant Deaths (under 1 year).		Deaths from Heart Disease.		Deaths from Pulmonary Tuberculosis.		Deaths from other Tuberculous Diseases.		Deaths from Respiratory Diseases, not including Influenza.		Deaths from Cancer.	
		No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.
3 Large Towns	91,330	949	10.4	1204	13.19	34	35.83	300	3.29	52	.57	8	.09	88	.96	214	2.34
7 other Urban Districts ...	58,134	713	12.65	658	11.67	26	36.47	193	3.42	28	.5	2	.04	50	.89	102	1.81
5 Rural Districts ...	138,436	1815	12.94	1719	12.26	76	41.88	452	3.22	57	.41	15	.11	147	1.05	280	1.99
Whole County ...	287,900	3477	12.08	3581	12.44	136	39.11	945	3.28	137	.47	25	.09	285	.99	596	2.07

† Rates calculated per 1,000 of the registered live births. * Rates calculated per 1,000 of the estimated population.

TABLE II.

DISTRICT.	Area in statute acres (land and inland water), 1931.	Inhabited houses at census 1931.	Population estimated by Registrar General, 1934.	Density of Population per acre, 1931.	Live Births.		Still Births.		Deaths under 1 year of age.		Deaths at all ages belonging to the District.		Death Rate per 1000 Population.	
					Number.	Rate per 1000 population.	Number.	Rate per 1000 population.	Number.	Rate per 1000 live Births Registered.	Number.	Rate per 1000 Total births.	Number.	Rate per 1000 Population.
<i>Three Large Towns.</i>														
Bexhill	7993	4548	21670	2.7	259	11.95	6	.28	22.64	7	27.03	261	12.04	
Hove	3953	12358	57870	13.9	564	9.75	15	.26	25.9	22	39.39	810	14.	
Lewes	1988	2890	11790	5.5	126	10.76	2	.17	15.63	5	39.68	133	11.36	
TOTALS ...	13934	19796	91330	6.3	949	10.4	23	.25	23.66	34	35.83	1204	13.19	
<i>Seven other Urban Districts.</i>														
Burgess Hill	2024	1631	6700	3.1	82	12.42	2	.3	23.81	4	48.78	91	13.78	
Cuckfield	3912	2484	12736	2.9	111	9.58	5	.43	43.19	5	45.05	121	10.44	
East Grinstead ...	6600	2111	9255	1.3	126	13.95	3	.33	23.26	6	47.62	113	12.51	
Newhaven ...	1772	1626	7082	4.2	102	14.71	9	1.3	81.08	2	19.61	80	11.53	
Portslade-by-Sea ...	1953	2117	10010	4.9	163	16.28	7	.7	41.18	6	36.8	117	11.69	
Rye	1027	1131	4068	4.	47	11.64	0	0.	0.	3	63.83	54	13.37	
Seaford	4274	1539	8283	1.6	82	10.01	5	.6	57.47	0	0.	82	10.01	
TOTALS ...	21562	12639	58134	2.5	713	12.65	31	.55	41.67	26	36.47	658	11.67	
<i>Five Rural Districts.</i>														
Battle	119966	7427	28991	.23	403	13.3	8	.26	19.46	14	34.74	408	13.48	
Chailey	66038	4109	16547	.24	223	12.78	13	.75	55.08	13	58.3	229	13.13	
Cuckfield	74335	5806	23432	.31	277	12.43	8	.36	28.07	13	46.93	276	12.38	
Hailsham	99138	7457	31510	.3	425	13.9	13	.43	29.68	13	30.59	327	10.69	
Uckfield	112096	9636	37956	.34	487	12.27	15	.38	29.88	23	47.23	479	12.08	
TOTALS ...	471573	34435	138436	.29	1815	12.94	57	.41	30.45	76	41.88	1719	12.26	
TOTALS FOR COUNTY ...	507069	66870	287900	.5	3477	12.08	111	.39	30.94	136	39.11	3581	12.44	

TABLE III.

Number of deaths at different periods of life in the Administrative County during the year 1934.

Sex.	Urban Districts.										Rural Districts.													
	All ages.	Under 1 yr.	1-2	2-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	Over 75	All ages.	Under 1 yr.	1-2	2-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	Over 75
Males	837	37	2	1	12	17	31	30	71	152	251	233	874	50	6	5	12	24	25	29	59	157	206	301
Females	1025	23	4	4	3	19	33	51	69	152	251	416	845	26	7	3	13	18	23	35	59	131	213	317
Total	1862	60	6	5	15	36	64	81	140	304	502	649	1719	76	13	8	25	42	48	64	118	288	419	618

TABLE IV (a).

Causes of and Ages at Death during the year 1934 in the Urban Districts.

9

Causes of and Ages at Death during the year 1934 in the Rural Districts.

Deaths in or belonging to Districts,
at subjoined ages.

BIRTH-RATE.

The total number of live births registered in the Administrative County during the year was 3,477 or 173 more than in 1933. Of the live births, 184 were illegitimate, giving a percentage of 5.29. In addition to the live births, 111 still births, of which 3 were illegitimate, were registered. The birth rate for the County was 12.08 live births per 1,000 of the population, a rate which was .45 per 1,000 above that for the year 1933. The number of births registered was lower by 104 than the registered deaths. The rate for England and Wales was 14.8 per 1,000.

DEATH-RATES.

General Death Rate.

The general death rate for the Administrative County was 12.44 per 1,000 of the population as compared with a rate of 13.09 in 1933. The rate for England and Wales was 11.8 per 1,000.

The Registrar General has supplied comparability factors for each Urban and Rural District and for the Administrative County as a whole for the purpose of adjusting the local death rates to compare these with the crude death rate for England and Wales, or with the mortality of any other local area the crude death rate of which has been similarly modified with its own factor for the purpose. If the populations of all areas were similarly constituted as regards the proportions of their sex and age group components, their crude death rates (per 1,000 population) could be accepted as valid comparative measures of the mortalities experienced by the several populations. In practice, however, the populations are not thus similarly constituted. Therefore, it is necessary to use the factor which has been supplied to make the necessary comparison. The factor for the Administrative County is .78 and when the crude death rate of 12.44 is multiplied by this figure the adjusted death rate for the County is shown as 9.73 compared with 11.8 for England and Wales.

The number of registered deaths from all causes in the County for the year was 3,581 as against 3,720 for the previous year—a decrease of 139. On comparison with the figures for 1933, deaths from twenty causes shew a decrease, the following shewing the greatest reduction:—

	Reduction.
Influenza	122
Other circulatory diseases	48
Pneumonia (all forms)	38
Bronchitis	37

Deaths from fifteen causes shew an increase, the chief of these being:—

	Increase.
Cancer	55
Other digestive diseases	46
Other defined diseases	24

Special reference is made below, under the appropriate headings, to infant mortality, maternal mortality and to deaths from tuberculosis, diseases of the respiratory organs, heart disease and cancer.

Infant Mortality.

There were only 136 deaths of infants under one year of age in the year 1934, giving a rate of 39.11 per 1,000 live births as compared with 149 deaths and a rate of 45.09 in 1933. The rate for 1934 is the lowest ever recorded for the Administrative County as a whole. Of the 136 deaths in 1934, twelve were of illegitimate infants. The infant mortality rate of illegitimate infants was 65.2 per 1,000 live births, which rate was 27.6 per 1,000 more than the legitimate rate of 37.6 per 1,000.

Of 119 deaths of infants, including inward transfers, notified by the Registrars of Births and Deaths in the Administrative County (excluding Hove) during the year 1934, seventy-one (59 per cent.) died during the first month of life, 25 between one and three months, 11 between three and six months, and 12 between six and twelve months. The causes of death during the first year of life were mainly congenital debility, premature birth, malformation, and other injurious conditions before and at the time of birth.

The following statement shows the average death rates of infants under one year per 1,000 births for five-year periods from 1906 to 1930, and also for the four-year period from 1931 to 1934:—

TABLE V.

Deaths at ages under one year per 1,000 births. Average rates at quinquennial periods and for the four-year period 1931 to 1934.

Period.	East Sussex.	England and Wales.
1906 to 1910	79.8	116.8
1911 to 1915	73.4	109.6
1916 to 1920	63.1	90.6
1921 to 1925	48.0	75.8
1926 to 1930	44.7	67.8
1931 to 1934	42.82	63.5

It is interesting to note that in 1915, the year in which the Maternity and Child Welfare Scheme in this County was inaugurated, the infantile mortality rate was 86.07 per 1,000 births, and that since then this mortality rate has been more than halved, thereby representing a saving in 1934 of the lives of 47 more infants in every 1,000 born than was the case in 1915. In other words, in 1915 only 914 infants out of every 1,000 survived the first year of life, as compared with 961 in 1934.

Maternal Mortality.

It is recorded in connection with the 3,588 live and stillbirths that 16 women lost their lives from causes directly due to child bearing or 7 more than in 1933, representing a Maternal Mortality rate for the Administrative County of **4.45** per 1,000 live and stillbirths, as compared with a rate of 2.64 in 1933. Six of the 16 women died from puerperal sepsis, representing a rate of 1.67 per 1,000, the remaining 10 died from other causes, representing a rate of 2.78 per 1,000. The 16 deaths include 1 from sepsis and 3 from causes other than sepsis, which occurred within the area of the Borough of Hove, which is a Local Authority for maternity and child welfare, representing a rate for the Borough of 6.9 per 1,000 live and still births. There were, therefore, 12 deaths in the maternity and child welfare area of the Administrative County of East Sussex, giving a death rate of **3.99** per 1,000 (**1.66** per 1,000 from sepsis, and **2.33** per 1,000 from other causes). The rate for the whole of England and Wales was 4.41 per 1,000 (1.95 from sepsis and 2.46 from other causes).

Each maternal death occurring in the Administrative County was the subject of a special enquiry, and full information was supplied to the Special Committee of the Ministry of Health on Maternal Mortality. Of the 12 deaths referred to above, 7 occurred amongst residents of the County area who were at the time of death in hospitals outside the County. The registered causes of death in these cases are as follows:—

1. Broncho pneumonia and Puerperal Mania.
2. Puerperal Septicæmia.
3. Puerperal Septicæmia.
4. Heart failure and Puerperal Septicæmia.
5. Streptococcal peritonitis and Puerperal fever.
6. Paralysis of bowels following instrumental delivery.
7. Puerperal Septicæmia and acute nephritis.
8. Post partum haemorrhage and syncope.
9. 1. Thrombosis of right lateral sinus.
2. Hyperemesis Gravidarum.
10. Internal haemorrhage from rupture of tubal pregnancy.
11. Placenta Praevia and post partum haemorrhage.
12. 1. (a) Pulmonary Embolism.
(b) Operation.
(c) Hydatidiform mole.
2. Peritonitis.

The following Table sets out the maternal mortality rate for each year during the last thirteen years.

TABLE VI.

Year.	England and Wales.	Administrative County of East Sussex (including the Borough of Hove.)	East Sussex Maternity & Child Welfare Area, (i.e., excluding the Borough of Hove).
1922	3.81	4.56	4.6
1923	3.82	2.85	2.7
1924	3.9	3.31	3.9
1925	4.08	2.6	2.4
1926	4.12	3.08	3.1
1927	4.11	5.02	4.6
1928	4.43	4.39	3.22
1929	4.33	2.9	2.57
1930	4.4	4.5	4.7
*1931	3.94	2.59	2.38
*1932	4.06	5.28	4.64
*1933	4.23	2.64	2.42
*1934	4.41	4.45	3.99

* Per 1,000 births, including stillbirths. The rate in previous years was calculated on live births only.

It will be seen from the Report of the Inspector of Midwives (page 16) that the Maternal Mortality Rate, in respect of cases attended by District Nurses acting as midwives, in the year 1934 was lower than the general Maternal Mortality Rate in the County. 1,296 cases were attended and there were only 4 deaths, which gives a rate of 3.08 per 1,000. This low rate is evidence of the careful supervision that is exercised and of the co-operation which exists between the nurses and their Superintendents, also of the ever ready help that is received from medical practitioners in cases of difficulty.

Death Rate from Tuberculosis.

In East Sussex, in 1934, pulmonary tuberculosis was responsible for 137 deaths, as compared with 126 in the previous year, and 25 deaths from other forms of tuberculosis as compared with 39 in 1933. The death rate from pulmonary tuberculosis was **.47** per 1,000 of the population, and from other tuberculous diseases **.09** per 1,000 in 1934 as compared with .44 and .13 respectively in 1933. The rates for England and Wales for 1934 were: pulmonary tuberculosis .63 per 1,000 and non-pulmonary .13 per 1,000.

The trend of the death rate from pulmonary tuberculosis continues to be downward. Although the reduction in the rate from year to year is small, yet it has been reduced to nearly half what it was in 1913. Pulmonary tuberculosis has its highest incidence at an age when the lives of those attacked are of most value to the community. Reference to Tables IV (a) and (b) will show that the majority of the deaths from pulmonary tuberculosis occur between the ages of 25 and 45. Other tuberculous diseases have a fatal issue at a somewhat earlier age.

The figures given below shew the average death rates from pulmonary tuberculosis for England and Wales and for East Sussex for the five year periods 1909 to 1933 and for the year 1934.

TABLE VII.

Deaths from pulmonary tuberculosis. Average rates per 1,000 of the population.

Period.	East Sussex.	England and Wales.
1909 to 1913 ...	.79	1.02
1914 to 1918 ...	.85	1.17
1919 to 1923 ...	.68	.89
1924 to 1928 ...	.59	.8
1929 to 1933 ...	.49	.69
1934 ...	.47	.63

Death Rate from Diseases of the Respiratory Organs.

The number of deaths in 1934 from non-tuberculous diseases of the respiratory organs including pneumonia was 317, or nearly one eleventh of all the deaths. The deaths from these diseases were less by 33 than in 1933. They are amongst the chief causes of death at the beginning and end of life and should at any rate in infancy be in a large measure preventable. The death rate in 1934 from these diseases was 1.1 per 1,000 of the population as against 1.23 in 1933.

Death Rate from Heart Disease.

There were 945 deaths registered from this cause, mainly in the later years of life. The rate of 3.28 per 1,000 of the population in 1934 is to be compared with 3.3 per 1,000 in 1933. Heart disease is responsible for over one-fourth of all the deaths in the Administrative County. Preventive measures should be directed to the prevention and treatment of rheumatism and other diseases resulting from streptococcal infection. The institution of periodical medical examination after the age of 40 years would bring these diseases under earlier treatment and reduce the incidence of heart disease.

Death Rate from Cancer.

596 deaths from this disease were registered, as against 541 in 1933. The rate of 2.07 per 1,000 of the population in 1934 was .17 per 1,000 higher than that in 1933. The rate for England and Wales for 1934 was 1.56 per 1,000. It will be seen from Tables IV (a) and IV (b) that most of the deaths occur after the age of 45. If the disease is diagnosed in its early stage there is evidence that life can be prolonged by suitable treatment.

Inquests.

A Table is given, in an Appendix to this Report, of a return of Inquests held in 1934 together with a Report by Dr. E. F. Hoare on Inquests held for the Lewes Coroner's District during the year.

PREVALENCE OF EPIDEMIC AND OTHER INFECTIOUS DISEASES.

Small Pox.

It is gratifying to be able to record that, for the second successive year, no case of Small Pox occurred in the Administrative County.

Diphtheria.

There were 114 cases of Diphtheria notified in the County during 1934, an increase of 39 over the figure for the previous year, but only 4 deaths occurred from the disease in 1934 as compared with 6 for the previous year, giving a case mortality of 3.5 per cent. against that of 8 per cent. for 1933.

Scarlet Fever.

There was an increase in the incidence of this disease in the year under review, 662 cases being notified as against 424 for the previous year. Unfortunately, the figure of 662 is the highest for the last five years. Of the cases reported, 5 deaths occurred, giving a case mortality of .75 per cent.

Scarlet Fever is a disease which spreads rapidly from child to child and it is for this reason that school children are particularly prone to contract it. The disease frequently is not recognised in some children owing to absence of the usual symptoms, and these children act as carriers of infection and are difficult to identify.

Enteric Fever.

Seven cases of Enteric Fever were notified in the County during 1934, as against 16 cases reported in 1933. No deaths were certified as being attributable to this condition.

Puerperal Sepsis.

During 1934 seventeen cases of this disease and 43 cases of Puerperal Pyrexia were notified. 6 deaths occurred from Puerperal Sepsis. Medical practitioners were in all cases informed of the facilities available for treatment under the County Council's Maternity and Child Welfare Scheme. A note on these facilities and on the results of treatment is given under the Section dealing with Maternity and Child Welfare.

Encephalitis Lethargica.

Only 1 case of Encephalitis Lethargica was formally notified during 1934, but 4 deaths were certified as being due to this disease.

Pneumonia.

121 cases of Pneumonia were notified in the County during the period under review, as against 162 during 1933. Acute Primary Pneumonia and Acute Influenza Pneumonia are the only varieties notifiable.

Ophthalmia Neonatorum.

Ten cases were reported during the past year, as compared with 13 cases for the previous year (see Section dealing with Maternity and Child Welfare).

Acute Poliomyelitis.

Only four cases of this disease were notified in the County in 1934, a decrease of 3 in the figure for 1933. Medical practitioners notifying cases of this disease are at once communicated with and acquainted with facilities offered by the County Council. Dr. Murray Levick, Consultant for Physical Treatment, visits patients in the home, when requested to do so, and consults with the medical practitioner concerned as to treatment.

The Non-Notifiable Infectious Diseases.

The most important of these are Influenza, Whooping Cough, Measles and Infantile Diarrhoea. The deaths registered from these diseases were as follows :—

Influenza	...	...	...	...	...	32	Whooping Cough	...	...	...	...	5
Measles	...	...	...	...	...	3	Diarrhoea (under 2 years)	...	...	...	...	7

In the area in which the County Council is the Local Education Authority, the Head Teachers are required to report to the School Medical Officer and to the District Medical Officer of Health all cases of suspected infectious disease, including those not notifiable. This enables the District Medical Officer of Health, in co-operation with the School Medical Officer, to take steps to prevent the spread of infection.

The County Medical Officer now issues to District Medical Officers of Health a weekly return of all cases of infectious diseases in the County, both notifiable and non-notifiable. Particulars for this return are obtained from the District Medical Officers of Health and from Head Teachers. It is issued earlier than the Registrar General's Return and gives fuller information in the case of Rural Districts to enable Medical Officers of Health to know when infectious disease occurs in close proximity to their districts.

ISOLATION HOSPITAL ACCOMMODATION.

The Isolation Hospital Accommodation available in the Administrative County is as follows :—

Small Pox.

The only Hospital provided specially for the reception of East Sussex cases of Small Pox is the Sedgebrook Hospital at Plumpton, recognised as having 10 beds on a basis of 144 sq. ft. per bed. This Hospital served five urban and three rural districts during the year 1934. The Brighton, Eastbourne and Hastings Small Pox Hospitals, which are all situated within the area of the Administrative County, were available for the reception of patients from the remaining districts in the County.

Other Infectious Diseases.

There are within the Administrative County 10 Isolation Hospitals for diseases other than Small Pox. The accommodation given in each is that recognised by the Ministry of Health :—

<i>Isolation Hospital.</i>	<i>Beds.</i>
Bexhill, Clinch Green	10
Chailey	18
Hurstpierpoint, Deans Farm	28
East Grinstead, High Grove	18
Hailsham	4
Willingdon, Park Croft	6
Hangleton	50
Lewes	12
Newhaven	12
Udimore	8

The Battle Rural District Council also arranged for the admission of infectious cases from their district into the Hastings County Borough Sanatorium, and the Tunbridge Wells Isolation Hospital.

A survey has been made of the Hospital accommodation for the treatment of infectious diseases in the County in accordance with the provisions of Section 63 of the Local Government Act, 1929, and the matter is still under consideration by the Public Health and Housing Committee. The Ambulances available for the transport of cases of infectious disease are given in the list of Ambulances on page 42.

TABLE VIII.
Cases of Notifiable Diseases occurring during the year 1934.

	TOTAL NUMBERS OF NOTIFIABLE DISEASES IN EACH DISTRICT.			Rural Districts.	Totals.
	Boroughs.	Urban Districts.	Rural Districts.		
Small Pox	0	0	0	0	0
Cholera	0	0	0	0	0
*Diphtheria (including Membraneous Croup)	114	36	8	0	0
*Erysipelas	107	14	6	0	0
*Scarlet Fever	662	54	56	4	209
Typhus Fever	0	0	0	0	0
*Typhoid Fever	7	1	0	2	0
Relapsing Fever	0	0	0	0	0
Continued Fever	1	0	0	0	0
*Puerperal Pyrexia	43	4	4	0	12
*Puerperal Fever	17	2	0	3	0
Plague...	0	0	0	0	0
Cerebro-spinal Fever	4	0	0	0	0
Acute Poliomyelitis	4	0	0	0	0
Ophthalmia Neonatorum	10	1	2	0	0
Acute Polioencephalitis	0	0	0	0	0
Encephalitis Lethargica	1	0	0	0	0
Malaria	0	0	0	0	0
Dysentery	3	0	0	0	0
Pneumonia	121	32	3	1	36
Trench Fever	0	0	0	0	0
	1094	178	113	76	5
					372
					26
					24
					39
					31
					55
					30
					205
					91
					72
					92
					40
					100
					122
					517

*These figures are taken from the Annual Return made to the County Medical Officer by the Registrar General.
In the case of other diseases the figures are extracted from the Weekly Returns made by the District Medical Officers of Health.

PUBLIC HEALTH ACTIVITIES OF THE COUNTY COUNCIL.

The Public Health Work of the County Council is reported upon hereunder, under the appropriate headings.

MATERNITY AND CHILD WELFARE.

Provision of Midwives.

The arrangements made by the County Council for the provision of a midwifery service were fully described in my Report for the year 1932. The service is adequate for the needs of the County and gives satisfaction.

The maximum annual grants allowed to District Nursing Associations in aid of midwifery and maternity nursing services and infant health visiting in respect of the financial year 1934-35 amounted to approximately £10,232. From this amount midwifery and maternity nursing fees received by the Associations were deducted, leaving a total net grant of £7,955.

In addition to the above grant a sum of £435 was paid to the East Sussex County Nursing Federation towards the expenses of the Federation attributable to midwifery, and a sum of £360 in respect of the training of midwives.

Amalgamation of adjacent District Nursing Associations has been continued in areas which can be efficiently nursed by one nurse with the assistance of motor transport. Thirty two District Nursing Associations have now been amalgamated, resulting in a reduction of sixteen Associations. Four of these Associations were amalgamated during 1934. Grants in aid of the provision of motor transport have been given in these cases. Grants have also been given to 31 other Associations towards the cost of motor transport, where special difficulty in carrying out the work has been proved to the satisfaction of the County Council.

Supervision of Midwives.

The number of certified midwives on the County Register at the end of 1934 was 164, of whom 162 were trained and 2 untrained. In the Borough of Hove 13 certified midwives were in practice during the year under the supervision of the Hove Town Council.

The following Table shews the number of midwifery and maternity patients attended by midwives practising in the County Area, excluding Hove, during the year.

TABLE IX.

	Number of Midwives practising on 31st Dec., 1934.	Number of Confinements attended during year.	Engaged as Midwife.	Engaged as Maternity Nurse.		
				Medical Practitioner absent.	Medical Practitioner present.	Total.
<i>Trained Midwives :</i>						
Working for Associations affiliated to East Sussex County Nursing Federation, (including Portslade)	103	1980	1231	171	578	749
Working for Non-affiliated Associations ...	1	18	18	0	0	0
Working independently or in Institutions ...	58	258	89	19	150	169
<i>Bona fide Midwives :</i>						
Working independently ...	2	3	3	0	0	0
Totals	164	2250	1341	190	728	918

Notifications under the Midwives Acts received from certified midwives during the year were as follows :—

(a) Medical assistance required—		(d) Engaged in laying out the dead ...	37
(i) for mother	588		
(ii) for infant	89		
(b) Deaths—		(e) Liability to be a source of infection	163
(i) of mother	1		
(ii) of infant	9		
(c) Stillbirths—		(f) Substitution of artificial feeding for breast feeding	39
(i) male	9		
(ii) female	5		

Inspection of Midwives—Report by Miss E. M. Wyatt, M.B.E., Inspector of Midwives.

“On the 31st December, 1934, there were 164 certified Midwives practising in the Administrative County of East Sussex, including Portslade, 103 of whom were working in districts affiliated to the East Sussex County Nursing Federation.

“During the year 366 routine visits were paid by the County Superintendent and 5 District Superintendents. 43 notifications of Puerperal Pyrexia, 30 of Discharging eyes, and 19 of Contact with Infection (requiring special reports) were received, and 71 special visits were made in connection with these. Of the 30 cases of eye discharge 9 were notified as Ophthalmia Neonatorum.

“The midwives on the whole maintain a high standard of practice. The value of supervision was demonstrated through the improvement effected in the practice of a few of the midwives whose methods were not entirely satisfactory at the first inspection.

“There were 4 Maternal Deaths amongst cases attended by District Nurse Midwives—(1) Heart failure, Puerperal Septicæmia, died in Hospital. (2) Puerperal Septicæmia, died in Hospital. (3) Puerperal Septicæmia and acute Nephritis, died in Hospital. (4) Post Partum Hæmorrhage and Syncope, died at home.

“The East Sussex Midwives’ Association which is now a Branch of the Midwives’ Institute, London, has a membership of 100. During the year 7 lectures have been given and the meetings have been well attended. The Association desires to express sincere thanks to the County Medical Officer of Health, and to other doctors and friends who have again so generously helped us during the past year.”

Contraception.

In accordance with the recommendations of the Ministry of Health in their Circular 1408 of 31st May, 1934, the County Council undertook during the year to give contraceptive advice to married women suffering from forms of sickness, physical or mental, which are detrimental to them as mothers. Five women received instruction during the year.

Ante-Natal Supervision.

The County Council have established, or have assisted to establish ante-natal clinics at Bexhill, East Grinstead, Hailsham, Portslade, Robertsbridge and Seaford separately from the Infant Welfare Clinic. In addition ante-natal consultations are held at 22 Infant Welfare Centres at the same time as the post-natal work. In areas not provided with a Centre or in cases where uninsured women find it impossible to visit a Centre, arrangements have been made whereby medical practitioners undertake ante-natal examinations. This arrangement came into force in May 1934, and 48 necessitous mothers were examined at the cost of the County Council. The district nurse midwives made 9,998 ante-natal visits during the year to 2,081 expectant mothers.

Provision of Consultants.

The Ministry of Health desire the Local Authority to satisfy themselves that a Consultant is available for any medical practitioner who needs such assistance in difficulties or in complications arising during pregnancy, or at or after confinement. Consultants were available for women suffering from puerperal fever and puerperal pyrexia. It is desirable that such assistance should be made available for other conditions affecting pregnancy.

Provision of Hospital Treatment, apart from Treatment for Puerperal Pyrexia.

During 1934, ninety women, as set out in the following tabular statement, were provided with hospital treatment at maternity hospitals. Of these, 28 were admitted because of difficulties arising directly in connection with labour, and 46 were cases in which ante-natal observation had detected disease or deformity which necessitated hospital treatment in the interests of the mother or the infant or both. In the remaining 16 cases the home conditions were unfavourable. Patients admitted with puerperal pyrexia are referred to under the appropriate heading.

TABLE X.

Hospitals.	Emergencies arising directly in connection with labour.	Induction of premature labour.	Pregnancy complicated by albuminuria.	Various.	Unfavourable home conditions.	Totals.
Brighton.						
Sussex Maternity and Women’s Hospital ...	23	5	8	3	—	39
Hastings.						
Fernbank Maternity Home	1	3	3	4	1	12
Tunbridge Wells Maternity Home	1	—	2	—	—	3
Battle.						
Institution	—	1	1	3	5	10
Shoreham.						
Southlands Hospital ...	2	2	2	6	7	19
Cuckfield.						
West Hylands Institution	—	—	—	2	3	5
Eastbourne Maternity Hospital	1	—	—	—	—	1
Hastings Municipal Hospital	—	1	—	—	—	1
Totals ...	28	12	16	18	16	90

The total cost of treatment provided for these cases by the Maternity and Child Welfare Committee was £682 16s. 6d., towards which the patients themselves contributed £242 17s. 8d., leaving £439 18s. 10d. as the net cost to the County Council, as against a total cost of £774 10s. 6d. (towards which the patients contributed £275 10s. 2d.) for the year 1933.

Puerperal Sepsis and Puerperal Pyrexia.

Facilities are available for obtaining the services of Obstetric Consultants, for the employment of an emergency nurse and for bacteriological examinations when necessary in cases of puerperal pyrexia.

During 1934, eleven women suffering from puerperal fever or puerperal pyrexia were seen by Obstetric Consultants at the request of medical practitioners. Of 54 women who were notified as suffering from puerperal sepsis or puerperal pyrexia, 38 women received treatment in hospitals or maternity homes. Twenty-seven of these received treatment under the County Council's scheme, 5 under the Poor Law, and 6 by other arrangements. Seventeen of these cases received treatment in Southlands Hospital. Thirty-two of the 38 patients recovered and 6 died. Sixteen women were treated in their own homes, all of whom recovered.

Treatment in Convalescent Homes.

Treatment was not given under the County Scheme to any woman in a Convalescent Home during the year.

Provision for Unmarried Mothers and their Infants.

During the year 1934, fifteen unmarried mothers with their infants were maintained at Hostels; 12 at the Bell Hostel, Eastbourne, 2 in the Church Army Home, Brighton, and 1 in a Hostel in London. The young women are usually admitted within three months of the expected date of confinement and remain for a period of twelve months. This provision is of special value in view of the high mortality in infants born out of wedlock.

Notification of Births and Infant Visiting.

The following Table shews the total number of births notified as occurring in the Administrative County (excluding the Borough of Hove) during 1934:—

		Males.	Females.	Total.
Living	...	1246	1143	2389
Still-births	...	42	36	78
Total	...	1288	1179	2467

Amongst the births notified are included 30 cases of twins (31 male and 29 female).

Details as to births not notified to the County Medical Officer of Health were supplied by the District Registrars of Births and Deaths.

Infant Health Visiting is carried out in East Sussex by the District Nurses, supervised by five specially qualified District Nursing Superintendents.

The County Council's Scheme for Infant Visiting provides for the whole of the Administrative County, except the Borough of Hove. The number of visits paid by the Infant Health Visitors during the year 1934 was 39,519, of which 17,224 were paid to infants under one year of age as compared with 39,963 and 18,932 respectively in 1933.

Maternity and Child Welfare Centres.

Grants totalling £470 were paid in aid of the expenditure of the Local Voluntary Associations towards the cost of maintenance of Infant Welfare Centres.

At East Grinstead, Newhaven and Portslade the work of the Centres, Infant Health Visiting and School Nursing is carried out by whole time Health Visitors appointed by the District Nursing Associations. Grants are paid equivalent to the whole salary and allowances of the Health Visitors at Newhaven and Portslade, and equivalent to half the salary and allowances at East Grinstead.

Rules are in force for the administration of Infant Welfare Centres which receive grants. These Rules provide for the keeping of proper records and for adopting a uniform procedure at all the Infant Welfare Centres throughout the County.

By the end of 1934, forty-five Maternity and Child Welfare Centres had been established within the County (excluding the Borough of Hove). The following Table gives certain particulars concerning each Centre :—

TABLE XI.

Name of Centre.	INFANT WELFARE WORK.				ANTE-NATAL WORK.			
	Total number of Children who attended during the year.		Total Attendances of Children.		Clinic on Separate Day or Hour.	Consultations during usual Session of Infant Welfare Centre.	Number of Expectant Mothers who attended during the year.	Total Number of Attendances.
	Under 1 year on 31/12/34.	Between 1 and 5 years on 31/12/34.	Under 1 year.	1 to 5 years.				
Albourne ...	9	18	68	123	—	Yes	5	10
Balcombe ...	8	34	180	256	—	Yes	7	7
Barcombe ...	8	23	43	126	—	Yes	2	5
Battle ...	6	25	60	61	—	—	—	—
Bexhill ...	58	92	572	812	Yes	—	72	124
Bolney ...	9	19	93	133	—	Yes	3	4
Brede and Udimore	12	31	45	147	—	Yes	8	9
Burgess Hill ...	29	117	356	245	—	—	—	—
Chailey North ...	5	13	33	133	—	—	—	—
Chailey South ...	3	18	31	128	—	—	—	—
Chiddingly ...	27	15	68	114	—	—	—	—
Cophorne ...	8	28	80	256	—	Yes	3	3
Crawley Down ...	15	51	72	512	—	Yes	3	4
Danehill and Horsted Keynes ...	14	68	203	535	—	Yes	4	4
East Grinstead ...	45	67	482	433	Yes	—	43	91
Etchingham ...	3	10	16	30	—	—	—	—
Forest Row ...	41	42	248	276	—	Yes	1	1
Hailsham ...	52	108	564	672	Yes	—	42	60
Hamsey ...	5	27	73	314	—	Yes	3	4
Haywards Heath ...	66	71	385	312	—	—	—	—
Hurst Green ...	10	14	47	42	—	—	—	—
Icklesham ...	4	10	23	98	—	Yes	2	9
Iden and Playden ...	17	40	62	196	—	Yes	8	17
Lewes ...	63	104	473	743	—	Yes	32	50
Lindfield ...	10	31	272	404	—	—	—	—
*Newhaven ...	76	52	470	285	—	—	—	—
Newick ...	12	30	85	83	—	Yes	2	3
*Peacehaven ...	25	42	252	265	—	Yes	9	20
Pevensey ...	12	23	152	205	—	—	—	—
Plumpton ...	8	55	73	225	—	Yes	1	2
*Portslade ...	109	103	1341	639	Yes	—	62	100
Robertsbridge ...	13	72	221	472	Yes	—	18	22
*Rye ...	18	52	82	152	—	Yes	13	28
Scaynes Hill ...	5	16	39	245	—	Yes	3	10
Seaford ...	30	79	275	485	Yes	—	30	44
Sedlescombe ...	5	31	59	143	—	—	—	—
Sidley ...	34	54	428	214	Included under Bexhill.	—	—	—
Turner's Hill ...	7	14	57	71		—	—	—
Uckfield ...	50	96	261	234	—	Yes	15	15
Wadhurst ...	18	69	187	246	—	Yes	22	29
Westfield ...	6	31	49	229	—	—	—	—
Westham ...	17	40	170	400	—	—	—	—
West Hoathly ...	6	39	71	311	—	Yes	5	7
Winchelsea ...	6	11	41	124	—	—	—	—
Withyham ...	10	40	60	137	—	Yes	7	13
TOTALS ...	994	2025	8922	12266	6	22	425	695

*County Council Centres.

During the year further consideration was given to the provision of a Central Clinic building at Bexhill for the purpose of holding ante-natal and infant welfare clinics, and which would also be used by the East Sussex Education Committee and the Bexhill Borough Education Committee for school clinic purposes. This building is ready for occupation and it will now be possible to provide much needed Clinic premises elsewhere, as the old Dispensary building at Bexhill which will be given up on the opening of the new building will be available for that purpose.

Public Health (Ophthalmia Neonatorum) Regulations, 1926.

Notifications of nine cases of Ophthalmia Neonatorum were received (excluding the Borough of Hove) during the year, three of which were treated in hospital.

TABLE XII.

Cases Notified.	Cases Treated.		Vision Unimpaired.	Vision Impaired.	Total Blindness.
	At Home.	In Hospital.			
9	6	3	9	—	—

All cases of Ophthalmia Neonatorum receive immediate attention; either the medical practitioner in attendance is communicated with by telephone, or a special visit is paid by one of the District Nursing Superintendents. Hospital treatment is arranged for, either with or without the mothers, at the Royal East Sussex Hospital, Hastings, at the Southlands Hospital, Shoreham, or at one of the County Infirmarys. Infants treated in their own homes are attended by the district nurses when these nurses are not in attendance on midwifery cases. When it is not possible for the infant to be attended by the district nurse, and hospital treatment is not accepted by the parents, the Maternity and Child Welfare Committee have authorised arrangements being made for the attendance of special nurses.

Vaccination.

Section 2 of the Local Government Act, 1929, transferred the duties relating to Vaccination to the Public Health and Housing Committee. During the twelve months ended 30th September, 1934, 1,003 successful primary vaccinations were carried out, of which 10 were performed in institutions. Of these 881 were of infants under the age of one year and 122 persons over that age. In addition, 74 successful re-vaccinations were carried out.

The following is a summary of Returns made to the Registrar-General by the Vaccination Officers in respect of children whose births were registered during the period from 1st January to 31st December, 1933, and accounted for in the Vaccination Registers up to 31st January, 1935.

TABLE XIII.

Vaccination Officer's District.	Births.	Number of Certificates of "Successful Vaccinations."	Number living unvaccinated		Number died unvaccinated	Percentage of living children vaccinated.
			Conscientious Objection.	Others.		
Battle	138	80	44	10	4	59.7
Bexhill	231	95	95	20	12	43.4
Chailey	110	41	49	17	3	38.3
Cuckfield	203	97	93	8	5	48.9
Eastbourne Rural	69	18	46	3	2	26.8
East Grinstead	145	48	81	15	1	33.3
Hailsham	223	59	154	5	5	27.1
Hastings Rural	22	16	5	—	1	76.1
Hove	447	154	231	45	17	35.8
Hurstpierpoint	150	67	57	18	8	47.1
Lewes	159	42	110	4	3	26.0
Newhaven	155	30	115	4	5	20.0
Portslade-by-Sea	111	32	69	7	3	29.6
Poynings	5	2	3	—	—	40.0
Rotherfield	142	49	81	6	6	36.0
Rye	131	76	50	3	2	58.7
Seaford	60	9	42	8	1	15.2
Ticehurst	150	90	45	11	4	61.6
Uckfield	161	54	102	2	3	34.1
Withyham	40	21	12	6	1	53.8
Worth	92	33	45	13	1	36.2
	2944	1113	1529	214	87	38.9

Marasmic Infants.

Treatment for nine marasmic infants was provided at the Chailey Heritage Hospital during the year. All of these children received great benefit from the treatment.

A grant of £351 10s. od. was made by the County Council towards the expenses of the Yarburgh Home for Infants, East Grinstead, under the Scheme made under the Local Government Act, 1929.

Provision of Home Helps.

The County Council have provided, in their Scheme, for Home Helps during the period of confinement when it is impossible to make other arrangements for the ordinary domestic duties usually undertaken by the mother. One application was sanctioned during the year 1934.

Supply of Milk.

The Maternity and Child Welfare Committee supply fresh milk to necessitous expectant and nursing mothers and to infants up to the age of five years when medically certified to require additional nourishment. Under the Local Government Act, 1929, the County Council have declared that this service shall be administered exclusively under the Maternity and Child Welfare Scheme and not under the Poor Law. During the year milk was supplied to 154 applicants, as compared with 138 in 1933.

Infant Life Protection.

The Committee have appointed the five District Nursing Superintendents and three Health Visitors employed by Nursing Associations as part-time Infant Protection Visitors. They make the first inspection of each child placed on the Register. Subsequent visits up to the age of 5 years are carried out by the District Nurses under the supervision of the Nursing Superintendents. From 5 to 9 years the Nursing Superintendents carry out the routine visits. The three whole-time Health Visitors carry out the routine visits throughout.

On 31st December, 1934, there were 348 children and 207 foster parents on the Register. 840 visits were made during the year by the Infant Protection Visitors and District Nurses.

During the year 8 Preparatory Schools have been visited by the County Medical Officer with a view to exemption under Section 69 (1) (b) of the Act of 1932. Exemption was granted in these cases for a period of one year, and exemption was renewed in 17 other cases.

Nursing Homes Registration Act, 1927.

During the year 1934, eight applications for the registration of premises under the above Act were received, and there were 51 Registered Nursing Homes on the County Register at the end of 1934. Three Exemption Certificates under Section 6 of the Act were renewed. Seventy-four routine visits of inspection were made during the year by the District Nursing Superintendents.

Dental Treatment of Expectant and Nursing Mothers and Infants.

Mr. A. Court, L.D.S., R.C.S., reports on the Dental scheme as follows:—

“ During the past year the attendances of mothers and children at the clinics in my area were almost identical with those of the previous year, although the amount of dental treatment to be carried out was less.

“ In addition to the actual operations, chairside advice and talks have been given to mothers, especially to expectant mothers, upon the extra care necessary during time of pregnancy. Observation and experience teach that the rapid decay often seen in these cases is due to loss of resisting power probably due to the absence of the necessary calcium foods. At this period a considerable amount of calcium is required for the development of the bony structures of the foetus and if this is not forthcoming in sufficient quantity then, no doubt, the teeth suffer from an inadequate supply. The expectant mother who can afford to pay due attention to her diet, which should consist of an abundance of milk and fresh foods, will greatly enhance her chance of keeping her teeth free from caries. The amount of dental caries in children would be considerably diminished if the parents had sound teeth.”

Mr. W. Eddings, L.D.S., R.C.S., reports as follows:—

“ The year 1934 shewed a decrease in the number of mothers' attendances—565 compared with 606 in 1933. The area served is mainly rural in character and, with no additional welfare centres, the number attending for advice and treatment is liable to fluctuate.

“ A more cheerful note on the treatment is that for the first time since the inauguration of the scheme the number of extractions is less than the number of attendances at the clinics. Conversely, the prosthetic branch reached its highest numbers for 94 complete and partial artificial dentures were fitted consequent on the heavy extractions last year.

“ Whilst the scheme undoubtedly has the widespread appreciation of the mothers—the majority attending regularly and receiving treatment to its conclusion—observation has shewn that the response to the scheme from the nursing districts is far from uniform (allowing for variability in population). For example, newly appointed nurses (on amalgamation of districts) have produced more applicants within a few months than their predecessors over a few years.

“ Dental caries is common to most of the community and if not checked quickly becomes a source of pain, sepsis and disease, and in the case of expectant mothers a possible danger at child-birth.

“ The majority of mothers attending the clinics cannot afford the cost of complete private dental treatment. I therefore suggest that the existing dental facilities be brought to the notice of all women using the county nursing services at the time of booking for their confinement.”

Mr. G. Rose, L.D.S., R.C.S., reports as follows:—

“ This year's work has been marked by a considerable increase in the number of infants attending the dental clinics and, as it has now been possible to follow many of the previous year's cases up to school age, it is encouraging to find that satisfactory progress is being made with the dental treatment of these little patients. The toothbrush habit is started young and, in addition to an improved dental condition, there is an increasing absence of fear on the part of children of their visits to the dentist.

"Success in the dental treatment of infants depends largely on the avoidance of extractions and this state can only be achieved by the infant visiting the dentist before decay is too far advanced. Many parents are now realising this fact.

"Dental work for infants naturally calls for great patience on the part of all concerned and the help of the nurse is invaluable. To maintain a healthy dental condition of the jaws and teeth just at the time of their greatest development is of extreme importance.

"Mothers continue to attend the clinics well, and every opportunity is taken to encourage them to bring their infants. The nurses' visits in this respect are most helpful and their help at the chairside is invaluable."

MATERNITY AND CHILD WELFARE DENTAL STATISTICS FOR THE YEAR 1934.

	Mr. Court.	Mr. Eddings.	Mr. Rose.	Totals.
No. of attendances at the Clinics	Mothers 452	565	678	1695
	Infants 74	73	174	321
No. of teeth extracted	Mothers 257	515	593	1365
	Infants 44	86	118	248
No. of teeth filled	Mothers 36	69	50	155
	Infants 31	17	43	91
No. of scalings	10	20	11	41
No. of other operations, including Impressions, Bites, Trims in, etc.	298	444	558	1300
No. of Artificial Dentures supplied	31	94	89	214

TREATMENT OF VENEREAL DISEASES.

The treatment of venereal diseases is one of the most important of the preventive health services provided by the County Council. The diseases have an important bearing on the morbidity statistics of mothers and infants and on infant mortality. Treatment Clinics were established in the County as a result of the Report of the Royal Commission on Venereal Diseases issued on the 2nd March, 1916, and of the Regulations issued by the then Local Government Board to give effect to its most important recommendations.

Clinics are held at hours convenient to patients of both sexes and under conditions of secrecy as far as is possible. The travelling expenses of necessitous patients are paid by the Council when certified for by the Medical Officers. In 1934, 40 persons were assisted in this respect at a cost of £58 4s. 9d.. Arsenobenzol preparations are used in the treatment of syphilis, especially in its early stages.

Dr. F. H. Lawson, Medical Officer of the Brighton Clinic, reports as follows:—

The total number of new patients attending was 174, four less than in 1933. These 174 patients were diagnosed as follows:—

	Primary		Congenital		Old Cases.		Transfers.		TOTAL.	
	M.	F.	M.	F.	M.	F.	M.	F.	Male.	Female.
Syphilis	2	—	3	3	II	6	2	2	18	11
					Fresh Cases.		Transfers.			
					M.	F.	M.	F.		
Gonorrhoea ... ...	...	...	...	...	...	...	29	14	4	7
Soft Chancre ... ...	...	...	...	...	...	I	—	—	1	—
Non-Venereal Disease ... ...	...	...	...	...	...	60	30	—	60	30
										174

The total attendances were 4,990 during 1934. Attendances: 1931, 5,673; 1932, 4,540; 1933, 5,052. By 'old cases' is understood any case not a primary syphilis such as secondary, tertiary, latent and neurosyphilis.

'Transfer cases' are cases seen and diagnosed at another clinic before attending the Brighton Clinic for the first time.

Dr. P. Lazarus Barlow, the Medical Officer of the Hastings Clinic, reports as follows:—

The total number of new cases attending the clinic during the year under review was 37, this is approximately a fifty per cent. increase on the previous year and equal to the number for 1932. Of these cases, 25 were from Bexhill as compared with 16 in 1933, and 12 from other parts of the County. This increase is not so bad as appears at first sight, since there were 18 cases which on investigation proved to be non-venereal as compared with 5 cases in 1933. This, I think, indicates that the public realises the importance of early treatment and of seeking advice in cases of doubt. Of the remaining cases, 9 were of syphilis as compared with 7 in the previous year and 10 were of gonorrhoea. This last disease shews a drop in new cases on 1933 when the number was 14.

The total attendances rose from 1,101 in 1933 to 1,457 in 1934, those from Bexhill increasing by 424 and those from the rest of the County decreasing by 68. The number of doses of arsenobenzene compounds administered to patients shewed a drop from 273 to 247. The number of "In-patient days" shewed a considerable rise from 5 in 1933 to 34 in the year under review. The total attendances from all areas shewed an increase of nearly 400.

Most of the patients attend regularly as requested, but each year a certain number have to be written off the books before completing treatment as no replies are received in answer to letters asking them to attend, or because no address has been given. As the area served by the clinic is so large, it is obviously impossible for the Sister to do any visiting in the outlying parts; a certain amount is done in Bexhill and usually results in the patients resuming treatment, at least for a time.

Dr. F. B. Manser, one of the Medical Officers of the Tunbridge Wells Clinic, reports as follows:—

There were 43 cases remaining under treatment on 1st January, 1935. Of these 22 were males and 21 females. The males were made up of 9 cases of syphilis and 13 of gonorrhoea. The females included 9 cases of syphilis and 12 of gonorrhoea.

The total number of new cases seen during 1934 was 18, 8 males and 10 females, made up of 3 male and 5 female syphilitics and 5 males and 4 females suffering from gonorrhoea, 1 female being classified as "condition other than venereal."

The total attendances to see the Medical Officer during the year were 326, made up of 99 males and 227 females. During the year 31 injections of N.A.B. were given and 118 of Bismostab. All these figures shew an increase on those of previous years.

I am still of the opinion that efficient treatment is being provided at the Clinic and though the distances of many of the patients' homes from the Clinic are considerable, the attendances on the whole are good, and patients shew commendable perseverance in trying to carry out instructions with regard to their treatment.

The number of patients from East Sussex attending the three County Treatment Centres during the year is given below:—

TABLE XIV.

	Royal Sussex County Hospital, Brighton.	Royal East Sussex Hospital, Hastings.	General Hospital, Tunbridge Wells.	Total.
OUT-PATIENTS.				
Number of new cases treated:—				
(a) Syphilis ...	29	9	8	46
(b) Soft chancre ...	1	—	—	1
(c) Gonorrhoea ...	54	10	9	73
(d) Non-Venereal ...	90	18	1	109
Totals ...	174	37	18	229
Total attendances of all East Sussex patients	4990	1457	410	6857
IN-PATIENTS.				
Aggregate number of In-patient days ...	31	34	23	88
No. of doses of arsenobenzol compounds given (Out-patients and In-patients)	623	247	31	901

The total number of new patients presenting themselves for the treatment of venereal diseases or for diagnosis was 9 more than in 1933.

In addition to the patients attending the County Treatment Centres, I have received information that patients from East Sussex attended at the following centres maintained by other authorities:—

Treatment Centre.	Number of Patients dealt with for the first time.	Total Attendances.	Total In-patient Days.	Doses of Arsenical Compounds given.
Croydon General Hospital ...	1	31	—	—
Redhill ...	2	35	—	—
Seamen's Hospital, Greenwich ...	3	30	—	4
South Shields ...	1	12	—	—
South London Hospital for Women ...	1	72	—	—
West London Hospital ...	2	11	4	5
Totals ...	10	191	4	9

No legal action was taken during the year under the Venereal Disease Act, 1917, in respect of unqualified persons giving treatment for venereal diseases.

Valuable educational work is undertaken on a national scale by the British Social Hygiene Council. The Rural Community Council have undertaken to act as the Sussex Branch of that Council and have arranged lectures and addresses in the County to parents and to leaders of youth movements. They received a grant from the County Council in aid of their expenditure.

Facilities for obtaining laboratory assistance in the diagnosis of Venereal Diseases are provided by the County Council for the Medical Officers in charge of the Treatment Centres, and for medical practitioners generally in the treatment of their private patients. The Laboratories at which specimens are examined are the Stephen Ralli Memorial Laboratory, Brighton, the Hastings Borough Laboratory, the General Hospital, Tunbridge Wells, the South London Hospital for Women, and the West London Hospital. Altogether 1,322 specimens were examined, 1,102 of which were sent by Medical Officers of Treatment Centres, and 220 by private medical practitioners.

TREATMENT OF TUBERCULOSIS.

The total number of primary notifications received in 1934 was 323, namely, 257 of pulmonary tuberculosis, and 66 of other tuberculous diseases, as compared with 215 and 67 respectively in 1933.

Details of the notifications received, together with other new cases of tuberculosis which came to the knowledge of the County Medical Officer of Health, and deaths occurring in 1934 are shown in the following Table.

TABLE XV.

Age Periods.	NEW CASES.				DEATHS.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
0 —	—	—	—	—	—	—	—	—
1 —	—	—	1	10	4	—	1	2
5 —	—	—	4	2	13	10	—	—
15 —	—	—	31	33	3	7	16	3
25 —	—	—	33	42	5	2	16	1
35 —	—	—	25	20	2	8	14	1
45 —	—	—	23	25	3	1	16	1
55 —	—	—	10	16	1	3	6	4
65 and upwards	—	—	12	4	—	1	15	2
Totals	...	138	143	37	36	76	61	11
								14

On comparing the statutory notifications of tuberculosis with the number of deaths from the disease reported by the District Registrars during 1934, it is found that 8.6% of the deaths occurred without the disease having been notified in this County under the Regulations.

The following statement gives the numbers and percentages of deaths occurring during the year within three and twelve months of notification :—

Total Number of Primary Notifications.	Deaths within 3 months of Notification.	%	Deaths between 3 and 12 months following Notification.	%
323	29	8.97	15	4.64

The following is a summary of the returns, received from District Medical Officers of Health, of the number of notified cases of tuberculosis on their Registers at the end of the year.

TABLE XVI.

Districts.	Number of notified cases on Register on 31st December, 1934.							Grand Total.	
	Population. 1934.	Pulmonary.			Non-Pulmonary.				
		Males.	Females.	Total.	Males.	Females.	Total.		
<i>Three Large Towns.</i>									
Hove ...	57870	128	122	250	28	47	75	325	
Bexhill ...	21670	28	33	61	9	10	19	80	
Lewes ...	11790	15	18	33	1	3	4	37	
<i>Seven Smaller Urban Districts ...</i>	58134	116	133	249	39	40	79	328	
<i>Five Rural Districts ...</i>	138436	275	281	556	138	127	265	821	
Administrative County	287900	562	587	1149	215	227	442	1591	

Tuberculosis Dispensaries.

Dispensaries for the examination and observation of cases of tuberculosis are provided by the County Authority at Lewes, Hove, Bexhill, and East Grinstead.

The following Table, prescribed by the Ministry of Health under Memorandum 37 T (Revised), shews the work carried out during the year at, or in connection with, the Dispensaries :—

TABLE XVII.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY				TOTAL.				
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—NEW CASES examined during the year (excluding contacts)													
(a) Definitely tuberculous ...	77	83	4	3	8	14	13	11	85	97	17	14	213
(b) Doubtfully tuberculous ...	—	—	—	—	—	—	—	—	3	4	—	—	7
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	55	102	42	31	230
B.—CONTACTS examined during the year :—													
(a) Definitely tuberculous ...	—	—	1	4	—	—	2	1	1	4	2	2	9
(b) Doubtfully tuberculous ...	—	—	—	—	—	—	—	—	—	—	—	—	—
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	4	24	37	45	110
C.—CASES written off the Dispensary Register as													
(a) Cured ...	6	4	—	—	2	2	6	6	8	6	6	6	26
(b) Diagnosis not confirmed or non-tuberculous ...	—	—	—	—	—	—	—	—	63	133	79	76	356
D.—NUMBER OF PERSONS ON Dispensary Register on December 31st, 1934													
(a) Diagnosis completed ...	363	324	7	12	35	53	60	67	398	377	67	79	921
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	3	4	—	—	7
1. Number of persons on Dispensary Register on January 1st, 1934 ...	883												
2. Number of patients transferred from other areas and of "lost sight of" cases returned ...	35												
3. Number of patients transferred to other areas and cases "lost sight of" ...	66												
4. Died during the year ...	111												
5. Number of attendances at the Dispensary (including contacts) ...	1178												
6. Number of Insured Persons under Domiciliary Treatment on the 31st December, 1934 ...	234												
7. Number of consultations with medical practitioners :—													
(a) Personal ...	161												
(b) Other ...	237												
8. Number of visits by Tuberculosis Officers to Homes (including personal consultations) ...	...	...	...	...	...	...	...	...	495			
9. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes ...	...	...	...	...	...	...	...	...	1341			
10. Number of													
(a) Specimens of sputum, &c., examined									558				
(b) X-ray examinations made ...									461				
11. Number of "Recovered" cases restored to Dispensary Register and included in A (a) and A (b) above ...	...	...	...	...	...	...	...	...	—
12. Number of "T.B. plus" cases on Dispensary Register on December 31st, 1934									397				

The County Council have 61 shelters for the use of patients who are recommended by the Tuberculosis Officer as suitable cases. At the end of the year 48 of these shelters were on loan to patients who were suffering from tuberculosis. Regular inspection of shelters is carried out by the Clinical Tuberculosis Officer and by the District Nursing Superintendents and 14 shelters were repaired during the year.

Report by the Clinical Tuberculosis Officer on the Work carried out at, or in connection with, the Dispensaries during the year 1934.

The work carried out at, or in connection with, the Dispensaries during the year 1934 has been fully maintained on the lines established in previous years.

The Dispensaries served as centres for diagnosis, observation and treatment, for examination of contacts, selection of cases for Sanatorium treatment, centres for education, information, etc.

Medical Practitioners in the County availed themselves of the facilities provided at the Dispensaries when it was practicable for patients to attend. When the patient's home has been situated at too great a distance from the Dispensary, or the patient has been unable to travel, the Tuberculosis Officer and the Assistant Tuberculosis Officers have visited the home, and in a large number of cases it has been possible to arrange for the examination of the patient to be carried out in consultation with the doctor attending the case. Arrangements have been made for all notified cases of tuberculosis to be seen by the Tuberculosis Officer, either at the Dispensary or at the patient's home. The number of visits paid to homes by the Clinical Tuberculosis Officer and the Assistant Tuberculosis Officers during the year was 495. Of this number, 161 visits were in consultation with the medical practitioner attending the case.

On appointment to the post of Medical Officer of Health for the Battle Rural District in July, 1934, Sir Alan Moore took charge of the Bexhill Tuberculosis Dispensary in succession to Dr. N. D. Dunscombe, who resigned in May, 1934; he also undertook the duties of Assistant Tuberculosis Officer in the Eastern Area of the County.

As in previous years, sputum specimen outfits have been supplied to doctors by the County Council, and the examination of specimens has been carried out at the County Laboratory at Hellingly. The number of specimens of sputum examined at this laboratory during the year was 334, fifty-two of which were found to contain tubercle bacilli.

The number of refills carried out on patients undergoing artificial pneumothorax continues to increase. A large number of cases of tuberculosis have been treated by collapse therapy, and refills have been carried out at the County Sanatorium, Robertsbridge, Southlands Hospital and at the Lewes Clinic. One half day session a week has been necessary at the Lewes Clinic, at which 10 patients received treatment during the year, the number of refills given being 94.

Periodical X-ray examination of patients undergoing artificial pneumothorax treatment has been carried out in all cases at the County Sanatorium. As the journey to Robertsbridge is inconvenient and often impracticable for patients residing in the Western part of the County, it is recommended that X-ray facilities be provided in connection with the Lewes Dispensary.

It has become increasingly recognised by medical practitioners in the County that X-ray examination is of value, not only for the diagnosis of doubtful cases, but for the purpose of record of the extent of disease in definite cases. The number of X-ray examinations carried out during the year was 461.

Artificial Sunlight Treatment.

The Table given below shows the extent to which patients attending the Lewes Artificial Sunlight Clinic availed themselves during 1934 of the facilities provided by the County Council for this form of treatment:—

				Adults.	Children.	Total	
Number of New Cases treated during the year	2	17	19
Number of Attendances	107	687	794
Number of Patients on Light Clinic Register:—							

1st January, 1934—14. 31st December, 1934—10. Average duration of Treatment—13.9 weeks.

SUMMARY OF NEW CASES:—	Rheumatism.	Rhinorrhœa.	Debility.	Cervical Glands.	Rickets.	Indolent Sore.
Still under treatment ...	I	I	8	7	I	I
	I	I	5	2	I	—

ARTHUR BEELEY,
Deputy County Medical Officer of Health,
and Chief Clinical Tuberculosis Officer.

Sanatorium Treatment.

On the 1st January, 1934, there were 62 East Sussex patients in the County Sanatorium, of whom 55 (27 males and 28 females) were suffering from pulmonary tuberculosis and 7 suffering from non-pulmonary tuberculosis. During the year 167 patients (78 males and 89 females) with pulmonary tuberculosis were admitted, and 12 patients (5 males and 7 females) with non-pulmonary tuberculosis. On the night of the 31st December, 1934, there were altogether 62 East Sussex patients in the Sanatorium, 54 patients (30 males and 24 females) with pulmonary tuberculosis, and 8 patients (5 males and 3 females) with non-pulmonary tuberculosis. There were 10 deaths (5 males and 5 females) amongst patients in the Sanatorium in 1934.

The following Table shews the number of East Sussex patients provided with residential treatment during the year either at the Darvell Hall Sanatorium or at other Institutions.

TABLE XVIII.

	In Institutions on Jan. 1.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31, 1934.
Number of doubtfully tuberculous cases admitted for observation	Adult. M.	3	12	15	—
	F.	2	28	26	—
	Children.	—	—	—	—
	Total	5	40	41	4
Number of patients suffering from pulmonary tuberculosis.	Adult. M.	25	71	60	4
	F.	25	65	67	3
	Children.	3	3	5	—
	Total	53	139	132	7
Number of patients suffering from non-pulmonary tuberculosis.	Adult. M.	5	4	3	1
	F.	4	5	4	2
	Children.	23	26	12	—
	Total	32	35	19	3
Grand Total		90	214	192	102

Cases admitted for "observation" and subsequently found to be suffering from tuberculosis are included in both "observation" and "treatment" groups above.

Darvell Hall Sanatorium.**Medical Superintendent's Annual Report, Year ended 31st December, 1934.**

The year 1934 has given ample opportunity of testing the value of the completed improvements. The result has been eminently satisfactory in that efficient work has been facilitated, and the previous unnecessary hardships of patients and staff have been removed.

There have been several interesting features during the year. The most important is the increased use made of the Sanatorium X-ray Department for diagnostic purposes. I hope this will be extended to all contacts. Eighty out-patients have attended for this, which is just double the number for 1933. The apparatus has been readjusted, a new shock-proof tube having been installed for radiography, whilst the old tube has been re-erected in a shock-proof screening stand, made by the staff engineer and carpenter. This is a highly creditable piece of work, which has called forth praise from several experts in radiography. This reorganisation has not only improved the standard of work, but it has enabled me to deal with the increased number of cases without inconvenience.

Hitherto we had an engineer without a workshop, as the original workshop had to be sacrificed when oil fuel was abandoned for coke. This was an uneconomic state of affairs, and this year the staff carpenter and staff engineer, with help from patients, have erected a commodious and well-warmed workshop, equipped with a lathe and other essential plant. The engine house and laundry have functioned well. The installation of "Scalebuoys" for the steam boilers has, however, not come up to expectations, and can only be described as a modified success. Investigations are being made as to the practicability of utilising a well on the estate, as an additional source of water supply.

The thorough repair of the old footpaths, and the laying down of new ones, necessitated by the new buildings, has been most efficiently carried out by the County Surveyor's Department. Paths in a sanatorium correspond to corridors in a hospital, and if any degree of cleanliness is to be attained in the wards, clinic and house, the inter-departmental paths must be smooth and free from mud. The garden staff have continued to improve the appearance of the grounds, and are to be congratulated on a very satisfactory Farm and Garden Balance Sheet. The unexpected reduction in the Estimate for repairs has rendered many necessary renovations impossible.

There are still two outstanding matters that call for improvement—the disposal of sewage, and the repair of the main drive. I am informed that the effluent from the existing sewage disposal works is pure, but assurance as to the strength of the aggressively penetrating smell that invades the men's hospital, nurses' home and patients' dining room is unnecessary. Thus I feel compelled to stand by the report that the sewage works are inefficient and offensive. The drive has served the Institution for fourteen years, with but one overhaul, except for that carried out by the Sanatorium staff. It was seriously overloaded during the reconstruction period 1932-3. Unless it is to be a constant recurring expense, it now requires radical treatment.

Methods of treatment have been the same as in previous years, and artificial pneumothorax, combined, of course, with rest and general treatment, continues to be most satisfactory. It is especially valuable in cases where there is cavitation, when the cavity can be effectively collapsed, as otherwise the ultimate prognosis tends to be rather poor. The following Table gives the results of artificial pneumothorax treatment for the last eleven years:—

Year Induced.	Reason.		Removed.	1934.		
	Curative.	Palliative.		Alive.	Dead.	Working.
1924	1	—	—	1	—	1
1925	2	2	—	3	1	1
1926	2	1	—	1	2	1
1927	8	8	2	6	8	4
1928	9	10	4	5	10	3
1929	11	5	3	9	4	8
1930	11	2	—	10	3	5
1931	35	22	5	33	19	18
1932	26	19	3	29	13	16
1933	27	14	3	34	4	17
1934	11	32	3	38	2	1
	143	115				
	258	23		169	66	75

The Clinic is in daily use for giving refills and other special treatment, and on Monday mornings, the regular time for out-patients who have artificial pneumothorax treatment, a second room has now to be used. Fifty-eight patients have attended regularly for this during the year, being screened when necessary, and examined quarterly. The number of refills given to out-patients has been 632, and 340 screen examinations have been made. At this point, may I put on record the great assistance given by Mrs. Dingley. She not only eases the routine work, but is of great help in elucidating obscure cases.

Phrenic Evulsion has been performed on 27 patients by Mr. Derrick Martin, F.R.C.S., who has held five sessions. In 12 cases it was done as an accessory to artificial pneumothorax. Immediate results were satisfactory in 68 per cent. of those done.

Sanocrysin, or another gold preparation Solganol, have been given to 20 patients. Nine of these had to discontinue injections owing to reaction, or for reasons unconnected with the treatment; two patients have had a complete course and have done very well; four have nearly finished and have improved; and five have not had sufficient for me to report on its effect. Sanocrysin is certainly of definite value in a certain type of case, and in some the disease is apparently checked in a remarkable manner.

Injections of Tuberculin have been given weekly, generally to chronic cases, unsuitable for any other special treatment. Two ex-patients on the staff have had these injections, and have worked without relapse. Seven of the 27 who have had Tuberculin this year have improved, and no harmful effect has been noticed in any case.

During the summer, surgical patients were able to have natural sun treatment. In winter the Carbon Arc and Mercury Vapour lamps have been used for 19 cases. One patient had a sensitive skin and could not tolerate artificial light; on another it had no apparent effect; the remainder progressed satisfactorily. We have noticed that light treatment has had a marked effect in some cases where there were discharging wounds, promoting healthy healing, where this had previously been very slow. Local light treatment with the Kromayer Lamp has been given to three patients with satisfactory results.

The X-ray Department has been kept busy, for 800 films were taken as against 539 last year, and I have made 1,128 screen examinations. One hundred and twenty-four out-patients, in addition to those attending for diagnosis, have been X-rayed. Some of these were doubtful or early cases, who were asked to return for a repeat radiogram, for comparison with the original film, and the results were encouraging in practically every case. The remainder were ex-patients having artificial pneumothorax treatment.

Other special treatment has been made possible by the co-operation of the County Medical Officer of Health, who has arranged for patients to be transferred to Victoria Park Hospital. One, an artificial pneumothorax case where effective collapse was prevented by adhesions, had these adhesions divided, and two others were admitted for the consideration of thoracoplasty and apiculosis respectively.

As regards occupational therapy, the cooking classes for men, which began in 1933, have continued this year, and have been an unqualified success. The keenness of the pupils is very gratifying. At the end of each course a test is given by Matron, who judges the work on grounds of economy, as well as for satisfactory cooking. At the time of writing an experimental cooking class for women has revealed a surprising degree of ignorance of this important subject, and we hope to make good this deficiency to some extent, amongst the women patients here. Basket-making has taken on a new lease of life under the regular instruction of an ex-patient. He, as well as all the men patients available, had a week's intensive course, which was given by an old patient, who is a skilled basket maker, in the spring. Since then this handicraft has made great strides, all completed work being inspected weekly, and there is a good stock of well-made baskets. Several of the bed-patients and those who were not fit for much exercise have made attractive model boats and aeroplanes, many of the former being complicated pieces of work. In doing this they showed much skill and ingenuity, and one of them, a gamekeeper, who made an excellent model while he was lying on his back, was astonished at the result, as he had never done anything of the kind before.

The Consultant Staff have visited as in other years. Mr. St. J. D. Buxton, F.R.C.S., has come three times, examining 59 patients, of whom 16 were out-patients. Three were recommended to King's College Hospital for operative treatment. All are making satisfactory progress. Mr. G. H. Howells, F.R.C.S., has paid seven visits, making 349 examinations. He cauterised the larynx of one patient, and snared a polypus in another case. He also arranged for the admission of a woman to the Golden Square Hospital for special treatment to her nose. Mr. K. F. Pedley, L.D.S., has attended for 20 sessions, giving 152 patient treatments. Through the use of a new anaesthetic some of the dental work has been completed much more quickly than was possible previously, and advantage has been taken of this when patients needed several extractions.

It has been a satisfactory year from the staff point of view. Changes have been few, and sickness practically non-existent. Through the kindness of Mr. Lennox Wright and Captain Wilson a branch of the Sussex County Library was established for the use of the staff, and it is very popular. Mr. and Mrs. Lennox Wright again entertained the nursing and clerical staff to a garden party in the summer, which all thoroughly enjoyed. Two nurses passed Part One of the examination of the Tuberculosis Association; nobody took Part Two in 1934. The senior staff appreciate having been made eligible for inclusion in the County Council's superannuation scheme. All the staff have worked harmoniously, and there is loyal co-operation, which results in a pleasant atmosphere, helpful to all in the Institution.

Services have been taken by the Chaplain, the Rev. A. H. Huxtable, who had also visited the patients regularly, the Rev. R. McKay and Father Loman, and we are all appreciative of these ministrations.

The usual Reunion was held on Whit Monday, and this year we decided to dispense with sideshows, which had previously been necessary to raise money for various sanatorium projects, and to give a real afternoon's entertainment to our ex-patients. We were able to do this owing to the kindness of Miss Purrott, whose pupils gave a charming display of dancing out-of-doors, and of the Rye Gymnastic Club, whose exhibition of tumbling was very entertaining.

Both patients and staff are grateful for the various entertainments which have been given. There is always a large and appreciative audience. Mrs. Lovelace and Mr. Spring Rice have frequently taken parties of three or four patients for drives, and these have been thoroughly enjoyed, as these patients have usually been people who were not able to go for walks. We should also like to thank those who continue to visit the Sanatorium regularly, and who make a special point of seeing patients who have infrequent visitors.

Many friends have made gifts to the Institution during this year, and ex-patients have expressed appreciation of their treatment in this very practical way. We are grateful to them all, especially those who remember the Sanatorium every Christmas. St. Christopher's Fund, originated and administered by our indefatigable Matron, Miss Edgar, has been of great help to patients. The staff contribute voluntarily to this fund, which provides necessitous patients with a small weekly sum, occasionally gives clothing where this is needed, and in special cases pays the fares for relatives to visit those who could not otherwise afford it. This small charity not only helps those who are in need, but it also stimulates the sympathy of the staff towards them.

We again wish to express appreciation of the help given by the Darvell Hall Committee, the Hastings Public Health Committee and the Tuberculosis Care Committee. The members of all are untiring in their efforts for the welfare of the patients, staff and the Institution.

J. R. DINGLEY,
Medical Superintendent.

Tuberculosis (Prevention of Tuberculosis) Regulations, 1925.

There were not any persons suffering from pulmonary tuberculosis reported to be employed in milking cows during the year 1934.

Public Health Act, 1925, Section 62.

It was not found to be necessary in 1934 to take any action under this Section for the compulsory removal to Hospital of infectious cases of pulmonary tuberculosis.

After-Care.

The East Sussex Rural Community Council completed their arrangements during the year for the care of persons suffering from tuberculosis before and after receiving sanatorium treatment. The County has been divided into four areas served by the Tuberculosis Dispensaries at Bexhill, East Grinstead, Hove and Lewes. In each area a voluntary Committee has been set up by the Rural Community Council, the Hon. Secretary of which receives from the Council's Nursing Superintendents the names of persons who would benefit by a friendly visit or who are in need of extra nourishment. Much extremely useful work was done by these Committees during the year. The County Council gave the Rural Community Council a grant of £100 in aid of their work.

TREATMENT OF ORTHOPÆDIC DEFECTS.

The Council's Scheme for the treatment of orthopædic defects has been described in my previous Reports.

The accompanying table, which gives particulars of the work done under the Council's Scheme at the Orthopædic Clinics, shows that 399 patients, including 214 new cases, were seen at the seven Clinics. Seventy-one of these new cases suffered from spinal curvature, fifteen from tuberculosis, twenty-one from rickets, and the remainder were cases of congenital and other deformities. One hundred and ninety-four patients were given treatment by massage and electricity and remedial exercises, 49 were received for varying periods into the Chailey Hospital, and 8 at other Hospitals.

The results of treatment of the 194 patients at the close of the year are thus summarised:—

- (a) 25 completely cured.
- (b) 141 improved.
- (c) 17 *in statu quo*.
- (d) 11 have just commenced treatment.

Out-Patient Treatment.**TABLE XIX.**

Clinics at Lewes, Hailsham, East Grinstead, Crowborough, Burgess Hill, Portsdown and Hastings.	Cases examined in 1934.			Cases for Treatment.		Total No. of attendances of all cases.	Nature of Deformities of New Cases.														
	New Cases.	Old Cases.	Total.	New Cases.	Old Cases.		Spinal Curvature.	Spastics.	Torticollis.	Rickets.	Bowed Legs.	Clawfoot.	Flatfoot.	Talipes.	Other Congenital Defects.	Old Fractures.	Knockknee.	Tuberculosis.	Hallux Valgus.	Other.	Total.
Children under 5 years of age	60	55	115	23	14	963	2	7	4	21	2	—	—	13	2	—	3	—	1	5	60
School Children between 5 & 16	153	122	275	102	52	2775	69	5	5	—	—	1	11	7	6	2	8	15	7	17	153
Persons over 16	1	8	9	—	3	94	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
TOTALS	214	185	399	125	69	3832	71	12	9	21	2	1	11	20	8	2	11	15	9	22	214

The following treatments were given at the Clinics :—

Electrical treatment 451, Massage 916, Remedial exercises 2,273, Strapping, Plaster, and Splinting 46, General Supervision 335 (including 7 visits to patients at their homes).

Hospital Treatment.

The total number of patients treated at the Heritage Hospital, Chailey, and at other Hospitals during 1934 is given below.

TABLE XX.

Classification.	Nature of Deformities.																		Result of treatment				
	Tuberculosis.						Other Congenital Defects.																
	Rickets.	Spine.	Hip.	Knee.	Other.	Talipes.	Deformity of Wrist.	Deformity of Knee.	Scoliosis.	Torticollis.	Other Congenital Defects.	Infantile Paralysis.	Elongation of Tendo Achilles.	Hallux Valgus.	Flat Foot.	Scar and Keloid.	Slipped Epiphysis.	TOTAL.	Cured.	Improved.	In Statu Quo.	Died, left County, etc.	
Children under 5 years of age	3	1	—	—	—	2	—	—	1	—	4	—	—	—	—	—	—	11	1	9	1	—	
Children between 5 and 16 years of age	—	4	8	5	1	2	2	1	—	3	1	6	3	1	1	4	1	43	7	31	5	—	
Persons over 16 years of age	—	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	1	1	—	1	
TOTALS	3	7	9	5	1	4	2	1	1	3	5	6	3	1	1	4	1	57	9	41	6	1	

Of the 57 cases, 49 were treated at the Heritage Hospitals, Chailey, 1 at the Wingfield Morris Hospital, Headington; 5 at the Royal East Sussex Hospital, Hastings; 1 at the St. Vincent's Orthopaedic Hospital, Eastcote, and 1 at the Princess Elizabeth of York Hospital, Shadwell.

Dr. G. Murray Levick, the Council's Consultant for Physical Treatment, reports :—

“ The following cases have received in-patient treatment at the Chailey Heritage Hospitals :—

Children under 5 years of age	...	...	...	...	7
Children between 5 and 16 years of age	...	...	...	...	39
Over 16 years of age	...	...	...	...	3

Twenty-one of the above cases were suffering from 'Surgical Tuberculosis.'

" It should be specially noted that a large number of the beds reserved by the East Sussex County Council under our Orthopaedic Scheme are occupied by tuberculous patients requiring, in most cases, several years' treatment. This means that sufficient provision has not always been available for other cases, some of which have urgently needed admission, and it is desirable that such cases should not be kept on the waiting list, because this is liable to increase the severity of their condition, so that in the end they require more prolonged treatment than would otherwise be needed.

" Thus the efficiency of the system of Out-patient Clinics is to some extent spoilt. In addition to their function as treatment centres, these Clinics are intended to be outposts of the central hospital ready at all times to refer cases for In-patient treatment without delay when this is needed.

" From this it will be seen that there are cogent reasons for increasing the present grant for In-patient treatment.

" It seems to me that funds for thirty beds are required if the scheme is to work efficiently. The gradual increase in the number of cases for whom treatment is asked is because the machinery of the Orthopaedic Scheme is becoming more widely known throughout the County, and is working with greater efficiency as time goes on. For the above reasons I hope an augmentation of the annual grant for Orthopaedic beds may be possible."

BLIND PERSONS ACT, 1920.

The County Council in their Scheme for the Welfare of Blind Persons in the County have entrusted the arrangements for their care to the East Sussex Association for the Blind. The details of these arrangements were fully given in my Annual Report for 1932.

The East Sussex Association for the Blind.

The General Case Committee of the East Sussex Association for the Blind met once a fortnight throughout the year. They received regular reports from voluntary representatives and their trained workers, and dealt sympathetically with all applications for assistance from blind persons.

Prevention of Blindness.

The County Council have arrangements with the voluntary hospitals at Brighton, Eastbourne, Hastings and Tunbridge Wells for the examination and treatment in their Eye Departments of persons suffering from diseases of and injury to the eyes.

The East Sussex Association for the Blind have been impressed with the need of educating the public as to the importance of getting skilled advice with the least possible delay in such cases and have realised that efforts to prevent blindness are of even greater value than the social work carried on with such conspicuous success by the Association on behalf of those whose sight has been irretrievably lost.

On the Preventive Register the Association have, at the present time, 71 cases of deteriorating sight. Many of these cases were reported by Hospital Almoners as having failed to attend for further examination or treatment. As a result of following up and continuance of treatment some have greatly improved while others have had to be placed on the Blind Register.

Register.

There are now 444 names on the Register of blind persons, an increase of 10 during the year. Before a name is included in the Register, a certificate of blindness from an ophthalmic surgeon is obtained in order to ensure that the definition of blindness laid down by the Ministry of Health is complied with.

TABLE XXI.

NUMBER OF BLIND PERSONS ON REGISTER AS AT 31ST MARCH, 1935.		AGES AT WHICH BLINDNESS OCCURRED.		EMPLOYMENT, AGE PERIOD 16 AND UPWARDS.	
Age Period.	Number.	Age Period.	Number.	Employed	Number.
0 to 5 years	3	0 to 1 year	34	Employed	62*
5 to 10 years	14	1 to 5 years	8	Trained but Unemployed	2
10 to 21 years	3	5 to 10 years	14	Under Training	2
21 to 30 years	14	10 to 20 years	29	No Training, but Trainable	4
30 to 40 years	24	20 to 30 years	42	Unemployable	357
40 to 50 years	44	30 to 40 years	31		
50 to 60 years	73	40 to 50 years	37		
60 to 70 years	98	50 to 60 years	70		
70 years and over	165	60 to 70 years	88		
Unknown	6	70 years and over	76		
		Unknown	15		
Total	444	Total	444	Total	427

* Including 17 Home Workers.

Home Teaching.

Two thousand seven hundred and thirty-four visits for instructional purposes were paid and 424 lessons were given to blind persons in the area during the year. 122 pupils received instruction, which included Braille and Moon Type reading and various handicrafts, including rug-making, pulp cane and raffia work, knitting, etc. The Home Teacher reported regularly to the Committee on her work of training and supervising the blind in the area. The Association found during 1934 that it was necessary to employ a second Home Teacher, and the Assistant Secretary, Miss Gouldsmith, undertook to receive training with a view to qualifying for the work.

The Home Teachers systematically visit the blind in their homes. In addition to lessons in Braille and Moon Type, general advice is given and help as far as is possible in any difficulty. Instruction in various handicrafts is also given to those of the blind who are classified as Pastime Workers, many of whom become very expert and produce beautiful articles.

Blind Home Workers.

Seventeen blind home workers were on the Register during the year, one of whom was a blind copyist. The wages of each blind home worker approved by the Public Health Committee were augmented by the County Council to the extent of 7s. 6d. a week. This payment has since been increased to 10s. a week. The Home Industries Department of the National Institute provides the workers with materials and markets their finished articles when not sold locally.

Unemployable Blind.

At the end of 1934 the Association was making weekly allowances varying between 1s. and £1 to about 100 unemployable and necessitous blind persons in the County.

The Public Health and Housing Committee instructed the Association to ensure that each blind person should have a minimum amount of 10s. a week for subsistence after paying rent.

Dependants of Blind Persons.

The amounts distributed by the Association as domiciliary assistance to unemployable blind persons and to dependants during the financial year 1934-1935 were:—

Blind Persons	£1135	Dependants	£353
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The County Council contributed the sum of £1200 towards these payments.

National Library.

A grant of £47 per annum was made in 1934 to the National Library for the Blind for the loan of books to blind persons in the County. The Library was used by 59 blind readers on the County Register during the year.

Institutional Care of Blind Infants.

At the beginning of the year 2 blind infants were maintained at the National Institute for the Blind Sunshine Home, East Grinstead. One was transferred to the Education Committee on reaching the age of 5 years, and the other was transferred to the Western Counties Association for the Blind.

Wireless Certificates.

During the year the County Medical Officer of Health issued 39 certificates to blind persons exempting them from payment for wireless receiving licences.

MENTAL DEFICIENCY ACTS, 1913 to 1927.

During the year 53 new cases were considered by the County Council's Committee for the Care of the Mentally Defective; of these 11 have been sent to Institutions, 1 placed under guardianship, and 36 placed under supervision. In the remaining 5 cases no action was taken.

The County Council have no special institutions for the care of mentally defective persons, but three of the Poor Law Institutions, namely, Chailey, Cuckfield, and Shoreham, are approved under Section 37 of the Mental Deficiency Act, 1913.

There are in the County two Certified Institutions for the reception of medium and high-grade male defectives, administered by the Brighton Guardianship Society, namely, Dungates, Horam (7 beds), and Tubwell Farm, Jarvis Brook (7 beds). The Guardianship Society also administer a Training Home for physically defective males at Walsh Manor, Jarvis Brook, and mentally defective boys are placed there under the guardianship of one of the Superintendents. The management of these Institutions is satisfactory.

The Hermitage Training Home at Fairwarp, with ancillary premises at Lark's Hill, Fairwarp, and Wharf House, Lewes, is the only other Certified Institution in the County managed by a Voluntary Association and is approved for the reception of medium and high-grade female defectives. The Institution is certified for the reception of 26 defective persons. The Hostel at Wharf House, Lewes, which accommodates 16 persons, was opened in 1932, for the transfer of girls from the Hermitage who were found to be suitable to be employed as daily domestic servants. The girls return to the Hostel each day to sleep and also during off-duty time. Wharf House has proved a great success, and has provided many of the girls from the Hermitage with a new interest in life, and has at the same time reduced the cost of their maintenance by allowing them to become wage earners.

The East Sussex Association for Mental Welfare undertakes the duty of supervising mentally defective persons in their homes. The Organising Secretary, Mrs. Ayshford Ayre, most efficiently acts as the Council's Home Visitor. A larger number of voluntary representatives should be appointed to maintain a satisfactory standard of visitation.

Altogether 263 mentally defective persons are being supervised, as shown in the following Table:—

TABLE XXII.

	Male.	Female.	TOTAL.
A. Defectives to be visited by the Official Home Visitor :—			
Once Quarterly ...	26	28	54
" Half-yearly	42	29	71
" Annually ...	24	5	29
	—	—	—
	92	62	154
B. Defectives to be visited by Voluntary Representatives of the Association :—			
Once Quarterly ...	10	9	19
" Half-yearly	24	18	42
" Annually ...	23	13	36
	—	—	—
	57	40	97
C. Defectives to be visited occasionally by the Official Home Visitor and by Voluntary Representatives ...	6	6	12
TOTALS	155	108	263

On the 31st December, 1934, the Committee were providing for 459 mentally defective persons under the Acts; 155 were maintained in either certified institutions or approved workhouses, 4 of whom were detained in "places of safety," 41 had been placed under guardianship, and 263 were under supervision in their own homes.

The following Table gives information as to the number of mentally defective persons on the Register of the Local Authority on 31st December, 1934:—

TABLE XXIII.

*Including 4 East Sussex cases detained in Rampton State Institution.

Of the 41 cases under Guardianship, 39 were being supervised on behalf of the Local Authority by the Guardianship Society, Brighton.

The next Table shews the number of new cases considered by the Local Authority and the number of cases which, for various reasons, were removed from the Register during the year 1934:—

TABLE XXIV.

		Male.	Female.	Total.
A. Cases considered by Committee during the year	...	32	21	53
B. Petitions presented and Orders obtained	...	11	7	18
C. Cases refused	...	—	—	—
D. Deaths	(i) In Institutions	...	—	—
	(ii) Under Guardianship	...	—	—
	(iii) Under Home Supervision	...	1	1
E. Transfers under the Lunacy Acts	...	1	1	2
F. Left the Area	...	—	—	—

The following Table gives the names of Certified Institutions or Approved Poor Law Institutions at which mentally defective persons were maintained by the Local Authority at the end of the year:—

TABLE XXV.

Name of Certified Institution.	Male.	Female.	TOTAL.
Besford Court	2	—	2
Brentby Colony	3	—	3
Coldeast Colony	—	1	1
Dungates, Horam	4	—	4
Eastbourne Poor Law Institution	—	1	1
Ellen Terry National Home, Reigate	—	1	1
Etloe House, Leyton	—	3	3
Hermitage Training Home, Fairwarp	—	28	28
Lewes Certified Institution, Chailey	29	7	36
Mary Dendy Home, Alderly Edge	—	1	1
Mount Olivet Certified Institution	3	—	3
Mount Tabor Certified Institution, Basingstoke	—	2	2
Pfield Heath House, Hillingdon	—	1	1
Princess Christian's Farm Colony, Hildenborough	2	3	5
Rampton State Institution, Retford	1	3	4
Royal Earlswood Institution, Redhill	1	2	3
Royal Eastern Counties' Institution, Colchester	2*	—	2
Rock Hall House, Bath	3	4	7
Shoreham Certified Institution	1	1	2
Stoke Park Colony, Bristol	2	7	9
St. Elizabeth's Home, Much Hadham	—	1	1
St. Teresa's Home, Lewisham	—	1	1
Tubwell Farm, Jarvis Brook	4	—	4
Walsham How Home, Wandsworth	—	1	1
West Hylands Certified Institution, Cuckfield	5	25†	30
TOTALS	62	93	155

* One boy has been granted long leave of absence to the care of a relative.

† One girl, who is also deaf and dumb, has been granted long leave of absence to the Home for Deaf and Dumb Women, Bath, and another is under the care of a Guardian, on leave of absence, in Scotland.

PUBLIC ASSISTANCE.

The number of beds available for East Sussex patients in the Public Assistance Hospital and Infirmaries and in the Hospitals maintained by the Eastbourne and Hastings County Borough Councils on the 31st December, 1934, is given hereunder:—

	MEN.	WOMEN.	CHILDREN.	TOTAL.
Southlands Hospital, Shoreham (a)	74	199	30	303
Battle Infirmary	44	50	—	94
*Chailey Infirmary	38	48	—	86
*Cuckfield Infirmary	66	68	9	143
East Grinstead Infirmary	23	22	3	48
Newhaven Infirmary	36	29	2	67
Rye Infirmary	22	19	—	41
*Ticehurst Infirmary	18	23	—	41
*Uckfield Infirmary	25	25	4	54
Beds reserved at Eastbourne, St. Mary's Hospital (b)	6	6	—	12
Beds reserved at Hastings Municipal Hospital (c)	5	5	—	10
TOTALS	357	494	48	899

(a) Including 75 beds reserved by the West Sussex County Council.

(b) Additional beds can be obtained when available.

(c) Number of beds is to be increased to a maximum of 25.

* In addition there are 23 beds in open-air shelters for tubercular patients, *viz.* :—Chailey, 15; Cuckfield, 4; Ticehurst, 2; Uckfield, 2.

Maternity patients and women suffering from Puerperal Fever and Puerperal Pyrexia are received at the Southlands Hospital, Shoreham, from the Maternity and Child Welfare Committees of the East Sussex and West Sussex County Councils and the Hove and Worthing Borough Councils.

The Battle, Cuckfield, East Grinstead and Newhaven Institutions also receive Maternity patients, and a Nursery for the care of children is provided at each of these Institutions.

The Shoreham, Cuckfield and Chailey Institutions are certified Institutions under Section 37 of the Mental Deficiency Act, 1913, providing accommodation for 5 male and 5 female mental defectives at Shoreham; 10 male and 20 female mental defectives at Cuckfield, and 36 male and 12 female mental defectives at Chailey.

Southlands Hospital, Shoreham.

This Hospital, which was formerly the Infirmary of the Steyning Union, was classified as a Public Assistance Hospital from the 1st July, 1932. The character of the services provided and the types of patients treated there have greatly changed since that date, and considerable progress has been made in bringing the buildings and staff to the standard of a first-class Hospital. The new Operating Theatre sanctioned last year has been completed and equipped and is now in use. The provision of an X-ray Department was sanctioned during the year.

The Medical Staff has been increased by the appointment of a Resident Assistant Medical Officer with special surgical experience making a total of three resident officers.

Increases in the Nursing Staff have been sanctioned from time to time, the total staff now being 70, giving a ratio of one Nurse to 4.3 beds.

The Hospital has been officially recognised by the General Nursing Council as a complete Training Hospital for Nurses.

The arrangement for the training in Midwifery of selected Probationer Nurses at the Sussex Maternity and Women's Hospital, Brighton, has been continued, and since the commencement of the scheme 6 Nurses have completed the course of training and qualified. At the end of the calendar year 2 other Nurses were under training.

The majority of patients treated in the Hospital are now of the acute type. During the year the total admissions were 2,079, this being 237 more than the total for 1933, but in spite of this increase the overcrowding of the wards previously experienced did not occur to any serious extent, in consequence of the shorter period of treatment made possible by the increase of the medical and nursing staffs, and better classification of patients.

The following table gives the numbers of patients admitted to the hospital during the calendar years from 1929 to 1934:—

	Admissions.	Maternity Cases included in admissions.		
		1929	1930	1931
1929
1930
1931
1932
1933
1934
		673	833	1315
	
		46	76	124
				161
				191
				231

During the year under review 344 major operations and over 1000 minor operations were performed at the Hospital, as compared with 277 major and over 800 minor operations in 1933.

This hospital dealt with 757 more patients than were admitted to the eight Public Assistance Infirmaries during the year.

Improvements at Southlands' Hospital and Infirmaries.

The principal improvements carried out during the year were as follows:—

SOUTHLANDS HOSPITAL, SHOREHAM.

Erection and equipment of Operating Theatre.
Construction of Corridor connecting Operating Theatre to Ward Blocks.
Admission Department provided on ground floor of Block D.
Accommodation for Resident Assistant Medical Officers provided.
Improvements to Laundry carried out.
Soft-Water Plant installed.

BATTLE INFIRMARY.

Erection of Disinfector House and Laundry Boiler House.
New Machinery, Electric Light and Power installed in the Laundry.
Sanitary Wing of Male Infirmary improved.
Heating installation remodelled.

BUCKFIELD INFIRMARY.

Kitchen improved and new Cooking Apparatus installed.

EAST GRINSTEAD INFIRMARY.
Water Supply improved.

NEWHAVEN INFIRMARY.
New accommodation for Master and Matron
provided.
Internal telephones installed.

RYE INFIRMARY.
New Heating Chamber and Installation
provided.

UCKFIELD INSTITUTION.
Gas Cooking Service installed.

Institutional Dietaries.

The Dietaries introduced on the 1st April, 1934, have proved satisfactory. Certain improvements have been made during the year, arrangements having been made for their variation according to the needs of patients and inmates, and better facilities provided for the cooking and serving of meals.

Examination of Institution Food Supplies.

Supervision of the food supplies for Public Assistance Institutions is carried out periodically by the County Health Inspector. There has been no case of unsatisfactory supplies during the year.

Subscription to Voluntary Hospitals and Associations.

Subscriptions to Voluntary Hospitals and Associations amounting to £372 16s. od. were authorised for the financial year 1934-35. This amount included subscriptions to 14 Voluntary Hospitals and 11 Associations, the sum of £150 being granted to the East Sussex County Nursing Federation for distribution to District Nursing Associations according to the services rendered in providing nursing for necessitous persons.

Domiciliary Medical Relief.

Details are given below of the patients attended by District Medical Officers and the numbers of attendances during the year:—

(a) Number of District Medical Officers	...	...	...	...	...	50
(b) Number of patients attended	...	...	...	...	...	1173
(c) Number of attendances at homes of patients	...	...	...	...	...	9667
(d) Number of attendances at Surgeries	...	...	...	...	...	3412
(e) Medicines provided	...	...	...	...	...	6232

The Medical Officers submit a monthly report to the County Medical Officer and to the Guardians Committees, giving particulars of their medical attendance, with recommendations for special treatment where required. A satisfactory service is provided.

County Ambulance.

The County Ambulance purchased in October, 1933, has provided an efficient service. This ambulance is used mainly for the conveyance of patients under domiciliary or institutional treatment provided by the Public Assistance Committee, but is also used for the transport of tubercular patients from the County Sanatorium. Particulars of the ambulance services in the County provided by Sanitary Authorities, the Police, and Voluntary and Private Bodies are given in a later section of the report.

Pathological Examination of Specimens.

The arrangement made with the Visiting Committee of the County Mental Hospital for the pathological examination of specimens at their Laboratory has been of great assistance to Medical Officers of the Public Assistance Institutions and considerable use is now being made of this service.

Statistics relating to the Poor Law Hospital and Infirmaries are given in Tables XXVI, XXVII, and XXVIII.

TABLE XXVI.

Accommodation in Public Assistance Hospital and Infirmaries for various types of cases and the extent to which it was occupied on the 31st December, 1934.

Classification.	MEN.		WOMEN.		CHILDREN.		TOTALS.	
	Provided.	Occupied.	Provided.	Occupied.	Provided.	Occupied.	Provided.	Occupied.
Medical and Surgical...	319	247	426	362	5	23	750	632
Children and Nursing								
Mothers	...	—	8	2	43	15	51	17
Maternity	...	—	22	11	—	—	22	11
Tuberculosis	...	17	18	12	9	—	(a) 29	27
Isolation	...	10	—	15	6	—	25	9
	346	265	483	390	*48	41	(b) 877	696

* Includes 30 beds for healthy children in Nursery at Shoreham Institution. There is only one Sick Children's Ward in the County Institutions, namely, at Cuckfield Infirmary (9 beds). The remaining children's beds are in Adult Wards.

(a) In addition there are 23 beds in open-air shelters for tubercular patients, viz.:—Chailey (15), Cuckfield (4), Ticehurst (2), Uckfield (2); occupied beds, however, include beds occupied by patients in shelters.

(b) In addition, beds are reserved for East Sussex patients as follows:—

Eastbourne, St. Mary's Hospital: 12 beds.

Hastings Municipal Hospital: 10 "

TABLE XXVII.
STATISTICS RELATING TO POOR LAW INSTITUTIONS FOR THE YEAR ENDED 31st DECEMBER, 1934.

Institution.	Total Admis-sions.	Maternity Cases Admitted.	Live Births.	Still Births.	Deaths among newly-born (under 4 weeks).	Total deaths among children under 1 year.	Maternal Deaths.	Total Deaths.	Patients discharged.	Beds occupied.		Surgical operations under an.esthetic.
										Highest occupied.	Lowest occupied.	
BATTLE ...	175	32	31	1	1	1	0	49	118	87	73	0
CHALEY ...	86	0	0	0	0	0	0	46	50	83	65	0
CUCKFIELD ...	406	43	43	2	5	8	0	80	326	136	108	19
EAST GRINSTEAD ...	182	6	6	0	0	0	0	43	139	43	25	3
NEWHAVEN ...	222	11	0	0	0	0	0	40	168	61	46	11
RYE ...	82	0	0	0	0	0	0	26	46	41	28	0
SOUTHLANDS HOSPITAL ...	2079	231	221	16	17	22	5	322	1769	302	211	344
TICEHURST ...	49	0	0	0	0	0	0	16	37	45	35	0
UCKFIELD ...	120	0	0	0	0	0	0	44	71	53	39	3
TOTALS ...	3401	323	312	19	23	31	5	666	2724	851	630	380

TABLE XXVIII.
CLASSIFICATION OF IN-PATIENTS WHO WERE DISCHARGED FROM OR WHO DIED IN POOR LAW INSTITUTIONS DURING THE YEAR
ENDED 31st DECEMBER, 1934.

ADMINISTRATION OF THE MILK AND DAIRIES (CONSOLIDATION) ACT, 1915, THE MILK AND DAIRIES ORDER, 1926, AND THE TUBERCULOSIS ORDER, 1925.

The activities of the Milk Marketing Board, which came into being under the Milk Marketing Scheme (Approval) Order, 1933, were further extended by the Milk Act of 1934, which came into operation on the 15th August, 1934. This Act provides "for temporarily securing to producers of milk, by means of payments out of moneys provided by Parliament, a minimum return in respect of milk used in the manufacture of milk products; for conditionally requiring repayment to the Exchequer of the amount of such payments; for making, out of moneys so provided, payments for the purposes of improving the quality of the milk supply and increasing the demand for milk; for regulating the manner in which milk is described for the purposes of advertisement and sale; for imposing and conferring certain duties and powers on boards administering milk marketing schemes; and for purposes connected with the matters aforesaid."

The effect of this legislation resulted in the operation of the milk in schools scheme from the 1st October, 1934, and the preparation of a scheme to establish a roll of Accredited Producers, this being officially adopted and due to operate as from 1st May, 1935.

The revision of County Districts which came into operation during the year incidentally brought about the rearrangement and increase of the staff of Public Health Departments of several of the Local Authorities in the County Area, which has resulted in a greater amount of supervision and inspection of premises where milk is produced and handled. It is gratifying to note that Local Sanitary Authorities are taking a greater number of milk samples than formerly for examination, particularly for the detection of tubercle bacilli. It should be borne in mind, however, that microscopical examination is far from being a satisfactory guide to tubercle infection of a mixed milk, and in such cases a biological test provides the only conclusive evidence of infection. The question of the freedom of the milk supply from the presence of pathogenic organisms, and in particular tubercle bacilli, is of foremost importance. It will be seen from Table XXX that, covering a period of 9 years, 2,664 cows were slaughtered under the Tuberculosis Order in the County, and of these 642, or 24.5 per cent., of the infected animals were found with tubercular lesions in the udder substance. It is certain that this latter group had at some time or another, and for varying periods, excreted milk containing tubercle bacilli, and it is for this reason that a biological examination of milk is emphasised, as it enables the offending animals to be detected during the early stages of the disease before any obvious clinical symptoms or abnormal condition develops, such as would give rise to suspicion in the mind of a cowkeeper.

The two whole-time Veterinary Inspectors of the County Council have continued to carry out the duties of investigation and inspection of dairy cattle, and it is satisfactory to note that more than double the number of farms have been visited during the year 1934 than in the preceding year. The details are given under two headings, (a) the Milk and Dairies (Consolidation) Act, 1915, and (b) the Milk and Dairies Order, 1926.

(a) Milk and Dairies (Consolidation) Act, 1915.

During the year 12 notifications were received in respect of actual or suspected tubercle-infected milk supplies from Medical Officers of Health of the following Authorities:—

County of London	...	...	...	5	Borough of Bexhill	...	...	...	I
County Borough of Croydon	...	...	3		Rural District of Uckfield	...	...	3	

The number of such notifications for the year under review is the lowest recorded since 1926. Whether this can be taken as a true index that milk produced in the County is now more free from tubercle infection or whether it is merely the result of circumstance in sampling cannot be determined. For the purposes of comparison a statement of the notifications received under Section 4 of the Act since 1926 is set out below:—

YEAR.	1926.	1927.	1928.	1929.	1930.	1931.	1932.	1933.	1934.
No. of Notifications	14	13	17	19	24	26	22	32	12

Investigations in connection with the notifications received during the year involved the examination of 520 dairy cattle and concerned 34 farms and supplies consigned to 2 wholesale depots. Ninety samples of milk were taken and submitted for examination, 23 from individual cows, 37 control samples from the milk of individual herds and 30 group farm samples from consignments of milk in course of delivery to wholesale collecting depots.

As the result of these investigations, 5 cows were found to be suffering from tuberculosis, 3 of which, after slaughter, disclosed tubercular lesions in the udder. It should be pointed out that 3 of the notifications concerned milk which, on microscopical examination only, had shewn the presence of acidfast bacilli, and following the investigations and failure to eliminate a diseased animal it was presumed that the bacilli originally found were other than, and indistinguishable from, tubercle.

The delay between the date of taking the original sample and the subsequent investigation at the farm, due to the intervening period varying from four to six weeks which is necessary for the biological test, is usually the responsible factor in those cases where failure occurs in tracing the source of infection. This delay is unavoidable, but unfortunately as a result, changes may take place in the constitution of dairy herds during this period, so that infected animals formerly in the milk herd may in the meantime have been placed in the open market for sale. Two animals were actually notified by the owners prior to the completion of our investigation, and in both cases the disease involved the udder.

(b) *Milk and Dairies Order, 1926.*

Inspection of dairy cattle under Part IV of the Order has been well maintained throughout the year and 14,807 cows have been examined, which is an increase, compared with the figure for the previous year, of 6,926 animals. Of the animals examined, 13,783 were cows in milk and 1,024 were dried-off and in-calf cows, etc. 798 farms were visited by the County Veterinary Officers for the purpose and 122 samples of milk were taken for microscopical or biological examination, including 38 control samples.

The inspections included 26 investigations respecting information received concerning calves and pigs, which, on slaughter, had been found to be diseased and suffering from tuberculosis. As regards the diseased calves, the source of infection in five instances was successfully traced and the responsible animals slaughtered. In three others the cows which had suckled the calves had been notified under the Tuberculosis Order prior to the investigation and the records of these cows definitely established that they were giving tuberculous milk. In a further case the responsible cow, whose milk was found on biological examination to be tubercle infected, had been sold for slaughter prior to the receipt of the pathologist's report. In the case of the diseased pigs it was not possible to trace the source of the infection.

The total number of cows found under the Milk and Dairies Order during the year to be suffering from scheduled forms of tuberculosis was 25, of which 16 were giving tuberculous milk.

The work carried out in connection with the duties of the County Authority under the provisions of the Milk and Dairies Acts and Order is shewn in the following Table:—

TABLE XXIX.

Particulars of Investigations.	Period.				
	Five years 1926-1930.	Year.			
		1931.	1932.	1933.	1934.
I. Number of Farms Visited	296	75	281	393	812
Number of Cows Examined	8000	1322	4530	9224	15327
Number of Cows found to be Tubercular:—					
(a) Clinically	9	4	4	13	14
(b) By Milk Test	43	14	9	14	15
(c) By Examination of Sputum ...	—	—	—	1	1
II. Number of Milk Samples submitted to Test:—					
(a) Individual Samples	613	533	322	214	145
(b) Control and Group Farm Samples ...	136	291	209	226	67

In the following Table is shewn the total number of cows which have been slaughtered since the year 1926 under the provisions of the Tuberculosis Order, 1925. Of the cows slaughtered, 141 were discovered by procedure under the Milk and Dairies Acts and Order, 30 of these being dealt with during the year under review.

TABLE XXX.

	Five Years 1926-1930.	Year.				Total.
		1931.	1932.	1933.	1934.	
Slaughtered	1644	239	204	207	370	2664
Found to be Tuberculous	1618	235	200	203	369	2625
With Lesions in the Udder	390	59	44	67	82	642

Milk (Special Designations) Order, 1923.

Licences to use the designation "Grade A" in the production and bottling of milk at the farm are granted by the Agricultural Committee of the County Council. At the end of the year 12 producers were licensed to supply "Grade A" milk in bulk and 10 licensed to produce and bottle their supplies.

In addition, the Ministry of Health, who are the licensing Authority in connection with the higher grades of milk, have issued 7 licences for the production and bottling of "Certified" milk, 1 for "Grade A" (Tuberculin Tested) milk and 5 for the latter grade in respect of production and supply in bulk only.

Milk in Schools Scheme.

The provision of milk in schools under the scheme inaugurated by the Milk Marketing Board, which came into operation on the 1st October, 1934, enabled children attending the public elementary schools to obtain milk at a cost to them of one halfpenny per one-third pint bottle. This scheme superseded the Sussex School Children's Milk Scheme, which provided for children to receive a similar quantity of milk at the cost of one penny.

During the three months in which the new scheme was in operation in 1934 arrangements had been completed for the provision of a supply of milk to 104 public elementary schools in the County. The total amount of milk supplied to these during the school period was approximately 15,000 gallons, made up as to Ordinary Milk 10,700 gallons, "Grade A" Milk 2,800 gallons, and Pasteurised Milk 1,500 gallons.

Bacteriological examination was made of 37 samples of milk supplied to schools and 27 of these were subjected to the biological test for tubercle infection. The results of the latter examination were negative in every case.

HOUSING.

Throughout the Administrative County Area there has been general activity in the erection of houses during the year and, whilst the shortage of houses cannot be described as acute, there would appear to be a definite need in certain districts for more houses of the type and rental suitable for married small wage earners.

Under the provisions of the Housing Act, 1930, schemes for the clearance or improvement of unhealthy areas and proposals for the erection of houses have been adopted by several of the local authorities in the County, either as additional to, or for replacement of, existing properties.

With regard to temporary dwellings, sheds, vans, tents, etc., these dwellings are shewing signs of increase in certain of the rural areas, more particularly in undeveloped districts near the sea. It is gratifying to know, however, that the local authorities concerned are seeking to obtain, or have obtained, powers to control this type of dwelling, which is liable to become a nuisance through lack of proper water supplies or inadequate sanitary arrangements.

The provision of houses during the year under review has been well maintained. A total of 2,396 houses have been built, only 28 of which were provided by two local authorities. In addition, 161 dwellings by conversion of existing premises into flats were made available, making a total of 2,557 houses provided. Compared to the total provided in 1933, this is an increase of 341 houses.

Inspection of Dwelling-houses Under the Consolidated Regulations, 1925-1932.

The total number of dwelling-houses inspected during the year by officers of the local sanitary authorities for housing defects under the Public Health or Housing Acts amounted to 5,233, and of these 3,020 were inspected and recorded under the above Regulations. The number of houses found to be unfit for human habitation was 161. Representations in respect of 92 of these houses were made and 32 demolition orders were issued, 27 of which were complied with and the houses demolished. In the case of 26, undertakings were accepted from the owners to render the houses fit for habitation and as regards 7 others, to use them for purposes other than for human habitation. The total number of other houses found not to be in all respects reasonably fit for human habitation was 1,463. Of the defective dwelling-houses dealt with during the year, 1,390 were rendered fit in consequence of informal action, 91 in consequence of action under the provisions of the Housing Act, 1930, and 161 following proceedings under the Public Health Acts, a total of 1,672 houses repaired. In the case of 2 separate tenements or underground rooms, Closing Orders were made, 1 of which was determined, the tenement or room having been made fit. In connection with 12 houses subject to Closing Orders previously issued under the provisions of the Housing Act, 1925, 2 houses were rendered fit and the Orders determined, and 7 others were demolished.

Housing Act, 1930—Section 34.

Provision is made under Section 34 of the above Act of 1930 that where a Rural District Council adopt proposals for the provision of houses, and where any they propose to provide in the district are required for the accommodation of the agricultural population, the County Council shall undertake to make a contribution of one pound per house for each of the forty years following the completion of such houses.

One application was received during the year in respect of two cottages in Albourne (Cuckfield Rural District). A contribution of £1 per house per annum for 40 years was approved by the County Council.

Housing (Rural Workers) Acts, 1926-1931.

The County Council are the Authority for the administration of the scheme formulated under these Acts for the improvement of housing accommodation.

The total number of applications up to the end of 1934 was 82, of which 14 were refused and 3 were withdrawn. In the remaining 65 cases the total assistance approved by way of grants amounted to £4,908 6s. od. No assistance by way of loans was given by the County Council.

It may be of interest to note that the Housing Act of 1935, which received the Royal Assent on the 2nd August, 1935, provides for extending the period of the operation of the above Acts from the 1st October, 1936, when they are due to expire, until the 24th June, 1938.

REFUSE COLLECTION AND DISPOSAL.

Collection and disposal of house refuse in each of the boroughs and urban districts in the County is undertaken directly by the authority or through the agency of a contractor. In the five rural areas the district councils also undertake this service by similar arrangements either throughout the whole district or the principal contributory parishes. In many of those parishes in which the scavenging of premises is undertaken privately by the owners or occupiers, extension of the public system is contemplated. Whilst a public system of cleansing is readily accepted as an essential service in thickly populated districts, the need is not always recognised in rural parishes. The beneficial effects of such a system may, however, be clearly observed by the general improvement in environmental sanitation, preventing, when put into operation, indiscriminate tipping throughout the countryside and accumulations of unsightly refuse in close proximity to dwellings.

In November, 1934, an Inquiry was held by the Ministry of Health into an application by the Newhaven Urban District Council for sanction to borrow £1,250 for the purchase of 8,121 acres of land and certain buildings thereon at Denton Island, Newhaven, for the purpose of disposing of the town's refuse by a system of controlled tipping. This system had up to then been satisfactorily carried out on land which had been fully utilised, and the new site proposed was a suitable one and could be well adapted for the purpose.

WATER SUPPLY.

During the year 1934 three new measures came into force dealing with water supply as a result of the serious effects of the drought throughout the country:—(1) The Rural Water Supplies Act, which empowered the Minister of Health to make contributions towards the expenses to be incurred by Local Authorities in providing or improving supplies of water in rural localities; (2) The Supply of Water in Bulk Act, which empowered statutory water undertakers to give and take supplies of water in bulk, and (3) The Water Supplies (Exceptional Shortage Orders) Act, which gave authority to the Minister of Health to make Orders and give directions with a view to meeting deficiencies in water supplies due to exceptional shortage of rain and for purposes connected with the matters aforesaid.

The rainfall in the County from the commencement of the dry period in 1933 up to October, 1934, was throughout well below the average. Exceptional rains in November and December (as much as 15.28 inches being recorded over the two months at the Lewes Waterworks Station) were, however, responsible for the total rainfall for the year being the greatest since 1930. Difficulties arising from shortage of water are still being experienced in parts of the county due to the abnormal dry period, particularly where the underground sources are at no great depth. Whilst the principal water undertakings have generally withstood the strain, it must not be overlooked that the effect on these may, at a later stage, become more apparent, as there is usually a time lag between a period of heavy rainfall and the replenishment of deep-seated sources and lower water-bearing strata. Meteorological Records set out in Table XXXIV at the end of this Report give the rainfall for the year recorded at stations in the County, and for purposes of comparison the monthly records for 1933 are shewn in italics.

During the year, in connection with works of water supply, the Ministry of Health held an Inquiry into an application by the Borough of Rye for sanction to a loan of £5,187. The scheme proposed provided for additional storage by the construction of a water tower, improvement of the supply to houses on the high ground to the north of the Borough, which previously received water from the Playden Water Tower, the provision of new mains to the recently added area and a new bore hole at the Cadborough Estate, with pumps and necessary buildings.

An Inquiry was also held by the Ministry of Health into an application by the Uckfield Rural District Council under Section 3 of the Water Supplies (Exceptional Shortage Orders) Act, 1934, for the issue of an Order granting powers to purchase certain water rights, properties and lands, for the purpose of affording a supply of water to parts of the Parish of Maresfield, due to the inadequacy of private supplies. The scheme provided for taking water from the overflow stream of the Boringwheel Pond and the construction of the necessary works of supply. As a permanent source of supply, there were objections to the use of this water owing to its poor quality, and in the circumstances it was considered advisable to explore other sources less liable to contaminating influences.

RIVERS POLLUTION PREVENTION ACTS, 1876-1893.
RIVERS POLLUTION—SEWERAGE AND SEWAGE DISPOSAL.

The low rainfall had again a marked effect upon the main rivers throughout the County. Observations were made during the year and samples were taken for examination where considered necessary. A period of drought causes the flow of streams and rivers to be below normal and consequently the concentration of polluting matters is higher than in times of normal flow. On the other hand, storm water, with its rain-borne dirt, tar, oil and manurial contamination, etc., from road and surface drainage, is likely to give rise to pollution to a marked degree. The fact that the rivers and streams are used as sources of animal water supply, and are or may be potential sources of water supply for human consumption, emphasises the need for continual supervision with a view to maintaining the highest attainable standard of purity. The use of watercourses as convenient outlets for the disposal and carriage of impure waste liquids, or as receptacles for solid refuse, gives rise in a varying degree to pollution, which not only damages stream life, but also destroys amenities which are worthy of protection and preservation.

Representations have been made with respect to the admission of polluting matters to streams, in two instances as the result of complaints. Measures of prevention have either been adopted or the question of improvement is under consideration.

During the year several applications were made by District Councils to the Ministry of Health for sanction to loans for works of sewerage and sewage disposal, and subsequently Local Inquiries were held. The total amount involved was £58,357 and particulars of the proposed works which Local Authorities contemplated undertaking are given in the following Table:—

TABLE XXXI.

Date of Inquiry.	Local Sanitary Authority.	Purpose of Loan.	Amount applied for.
17.1.34	Portslade-by-Sea U.D.	Sewerage ...	£4,027
20.2.34	Newhaven U.D.	Sewerage, Pumping Station and Plant ...	£10,000
19.4.34	Uckfield R.D.	Sewerage and Sewage Disposal (Rotherfield and Crowborough)	£21,700
20.4.34	Cuckfield R.D.	Sewerage and Sewage Disposal (Poyntings) ...	£750
27.7.34	Hailsham R.D.	Sewerage and Sewage Disposal (Hailsham and Hellings) ...	£21,880
		Total ...	£58,357

FOODS AND DRUGS (ADULTERATION) ACT, 1928.

This Act is administered by the General Purposes Committee of the County Council, and not by the Public Health and Housing Committee.

The subjoined summary shows the number of samples taken for analysis under the Food and Drugs (Adulteration) Act, 1928, during the year 1934, together with the number of adulterated samples detected:—

TABLE XXXII.

Article Analysed.	Number of Samples.	Report of Analysis.		Greatest Amount of Adulteration of any one sample.
		Genuine.	Adulterated.	
FORMAL SAMPLES.				
Milk ...	351	322	29 (a)	(a) One sample was deficient in fat 28% and in solids not fat 36.3%
Milk (skimmed) ...	2	2	0	
INFORMAL SAMPLES.				
Barley Kernels ...	1	1	0	
Butter ...	7	7	0	
Margarine ...	1	1	0	
Milk ...	37	0	37 (b)	(b) One sample was deficient in fat 66.6% and in solids not fat 56.5%
Milk (skimmed) ...	1	0	1	
Pearl Barley ...	2	2	0	
Formal Samples ...	353	324	29	
Informal Samples ...	49	11	38	
Totals ...	402	335	67	

PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS, 1925.

One hundred samples were taken and examined under the Public Health (Preservatives, etc., in Food) Regulations during the year. Five samples contained varying amounts of preservative, one within the limits allowed by the Regulations. Three, however, contained a rather high percentage, and one, of dried fruits, contained a trace of boric acid—a prohibited preservative. The circumstances under which the latter sample contained the preservative were thoroughly investigated, and the

conclusion arrived at was that the soil in which the fruit was grown contained the boric acid which was present in the fruit by natural means and had not been added artificially in the form of a preservative. In addition to the samples taken and examined under the Regulations, all milk samples taken under the Food and Drugs (Adulteration) Act, 1928, and included in Table XXXII above, were tested for preservatives and artificial colouring matter, with negative results in every case.

AMBULANCE FACILITIES.

(a) For General Non-Infectious Cases.

One motor ambulance is maintained by the East Sussex County Council at the Southlands Hospital, Shoreham. This is used for the transport of cases to and from the Hospital and also for the transport of cases of tuberculosis to and from the Darvell Hall Sanatorium. The voluntary ambulances in the County are mainly those of the British Red Cross Society or the St. John Ambulance Association.

British Red Cross Society ambulances are stationed at Crowborough, East Grinstead, Haywards Heath, Hove, and Uckfield. St. John ambulances are stationed at Battle, Eastbourne, Hailsham, Hastings, and Lewes. Other ambulances available are:—Brighton Police; Hove Police; Newhaven and District Nursing Association; Haywards Heath Cottage Hospital; Hill House Hospital, Wadhurst; Lewes Borough Council; Heathfield; and three private ambulances, one at Eastbourne, and two at Hove.

The County Health Department makes use of the Red Cross and St. John ambulances when the County ambulance is not available, or when the use of another ambulance is more convenient.

(b) For Infectious Cases.

Motor ambulances for infectious cases are provided at the following Isolation Hospitals:—Chailey; High Grove, East Grinstead; Lewes; Hastings Sanatorium; Deans Farm, Hurstpierpoint; and Hove Isolation Hospital. A motor ambulance is provided when necessary by arrangement with a local garage or otherwise for the transport of patients to the East Sussex Western Smallpox Hospital, Plumpton, and to the Isolation Hospitals at Bexhill, Willingdon and Hailsham. At the Newhaven and Udimore Isolation Hospitals horse drawn ambulances are available.

The ambulance service provided in the County appears to be quite adequate for the present needs of the district, and no instance of any undue delay in obtaining an ambulance, when required, has been reported.

NOTE ON INQUESTS HELD IN THE LEWES CORONER'S DISTRICT DURING THE YEAR 1934.

BY EDWARD FITZWILLIAM HOARE, M.D., Ch.B., Barrister at Law.

The number of deaths reported to the Coroner, for his consideration during the year, was 523, a decrease of 19 on the previous year. Of these 163 were deaths in Mental Hospitals being less by 41 than the year before, possibly due to a comparatively lesser number of deaths from influenza and pneumonia during the earlier months of the year. Investigation was held in 11 of these cases: postmortem examination in 1; and inquest in 3; the remaining 148 being accepted on the medical certificate.

The remaining 360 deaths were "inmates of institutions" 11, and "other persons" 349, of which 195 were dealt with by enquiry, doctors' reports, and postmortem examination, leaving 165 involving inquest.

The total inquests were, therefore, 3 mental cases and 165 others, making a total of 168, 27 more than last year, consisting of a female increase of 8 and a male increase of 19.

The total of 168 was composed of 111 male and 57 female persons, and the verdicts returned were of corresponding number.

The verdicts were:—

- (a) *Natural Causes*—3.
- (b) *Criminal Acts*—Manslaughter, 2; Suicides, 46.
- (c) *By Exposure*—1.
- (d) *Drugs and Alcohol*—0.
- (e) *Want of Attention at Birth*—0.
- (f) "Open Verdict"—12 (7 males and 5 females).
- (g) *Misadventure*—104 (64 males and 40 females).

This last group included 2 cases of "over-lying" but no cases of death in infants under 24 hours old.

In these inquest cases there were 13 postmortems held, making, with those held in non-inquest cases, 33—a total of 46.

As to Group (a). In these some extraneous circumstance made inquest desirable.

As to Group (b). *Manslaughter*: Both cases arose out of motor accidents. At Assizes one was found guilty, and the other not guilty.

Suicides. These shew an increase of 7 on previous year, viz., 5 more males and 2 more females. The increase is curious and seems to indicate little relation between hard times and the act, as taken on the whole 1934 was a better financial year than 1933. Inherent mental instability is still the predominating cause, the more violent methods remain the male choice, whereas the female finds the method nearest at hand namely the gas oven or poison. The Home Office return to ascertain the age groups corresponds to my unofficial analysis of last year, and shews two-thirds of all cases to be over 50.

In general I am forced to the conclusion that more and more is this act done on supposed "rational" grounds rather than in moments of real "temporary insanity." Mental instability there often is, but true evidence of an insanity, sufficient to excuse the killing of *another*, is seldom to be found and after all, this is the crucial test of "insanity." I advocate the view that all penalties, civil and ecclesiastic, having virtually ceased, the whole "raison d'être" of the verdict "while not of sound mind" has passed away and that these words nowadays serve no purpose to the dead and only inflict on the living the dread and stigma of insanity, often on very slender evidence. A simple verdict of "so killed himself" would soon cause no distress and the excusability or otherwise of the action, in any particular instance, could be decided by those interested financially or clerically. I think none of these cases need a Jury, and that by reason of their strong "suggestibility" on persons of weak mentality, they are the one type of case which should not be reported by the Press. The tables of analysis are set out below:—

Causation	Males	Females	Methods	Males	Females
1. Nervous instability	17	3	1. Gassing	6	4
2. Disease or dread of	6	3	2. Hanging	6	1
3. Worry (finance-domestic)	7	2	3. Drowning	10	2
4. Grief (bereavement, etc.)	0	0	4. Poisoning	3	2
5. Drink or Drugs	1	0	5. Under vehicles	3	0
6. Love affairs	1	1	6. Height jumping	0	1
7. Insomnia	3	1	7. Throat Cutting	3	0
8. Loneliness	0	0	8. Shooting	5	0
Felo de se	1				
	36	10		36	10

N.B. Causation and method bear no relation to each other.

AGE.	VERDICTS OF SUICIDE.			
	Felo de se.		Others.	
	M.	F.	M.	F.
Under 12	—	—	—	—
12 and under 14	—	—	—	—
14 "	16	—	—	—
16 "	17	—	—	—
17 "	21	—	—	1
21 "	30	—	—	3
30 "	40	—	—	2
40 "	50	—	—	6
50 "	60	—	—	12
60 " above	—	—	—	4
Total	1	—	35	10—46

The one case of height jumping was not from the cliffs and the horrible attraction of Beachy Head seems to be lessening. Using trains, as the means, attracted the same number as last year. So far, electrocution either by land or rail line has not occurred.

Groups (c) (d) and (e). Need little comment. There being none in the "want of attention at birth" is a pleasing fall from 2 last year and it is of interest that the total deaths in England and Wales from this cause is falling, being 61 less for 1933 than in 1932, e.g., 165 from 226.

Group (f). Open Verdicts. This undesirable verdict exceeds last year's, being 12 as against 6, and consisted of 6 "found drowned"; 3 "found killed" by falling from cliff, window or train; 3 found dead from exposure, drugs, and unascertainable cause. The 9 in the first two groups were strongly suggestive of suicide rather than accident—the remaining 3 more likely accident than suicide, but, in all, direct evidence was absent.

Group (g). Misadventure. This is an increase of 17 on last year, and of 24 on the previous year. Mainly it is due to an increase of 13 more male fatalities, but also 4 more female, making in all 64 males and 40 females.

The total transport fatalities including motors, motor-cycles and cycles were 40; leaving 64 due to other causes. The increase therefore was due to only 4 more road fatalities and 13 more "other causes."

The road accidents involved 29 males and 11 females—other causes involving 35 males and 29 females making a total from all causes of 104.

The actual vehicles involved in the 40 fatalities were, 25 motor cars or lorries ; 8 motorcycles ; and 7 cycles. This shows less motorcycle fatalities by 6, but a marked increase in pedal cycle deaths arising from the cycle itself (and not from being run down by car, which is included under "motorcar").

By the courtesy of the Coroners of areas into which inquests of fatal accidents taking place in my area may be removed, I have ascertained that some 10 more motor fatalities should be added to my return of 40. In these days of removal of the injured to hospitals far removed from the scene of accident, the question of whether an amendment, of the rule of Inquest "where the body is lying dead" might not be made, to Inquest where the fatal injuries originated. As it is, it often results in the Jury having no local knowledge of the spot.

Considering that this area of Lewes includes both London roads to Eastbourne and Brighton, and regrettable as the 50 fatalities are, it must be a very small percentage of the number of cars on those roads, and would indicate that traffic conditions and their remedy depend rather on the urban or rural nature of a road, than on the number of cars on it, or even their speed on it. The vast majority of fatalities occur in urban areas and personally I welcome the 30 mile limit (now in force at the time of writing) and do not regard with too much apprehension the alleged danger that cars will consequently go "ever so much faster" in unlimited areas—if for no other reason than that cars have always gone as fast as possible and going 30 m.p.h. in one particular place will not increase their capacity to go faster elsewhere, however much this may be desired by their drivers.

This year we are asked to keep statistics regarding the deaths of young children on the road. This again is largely a question of locality. I have had very few over the last 5 years and none in 1934, and in the general rate for the country there is a slight decrease. My own view is that, thanks to the voluntary work of the school teachers, the child of today is far better endowed with "road sense" than its elders.

As to the "other causes" of accidental deaths. This is still lamentably high and apparently increasing, my figures show them as 60 per cent. or more than half the total deaths, and the return for England and Wales (for 1933) shows 54 per cent. roughly—actual figures 8,083 in 14,832.

The analysis is as follows :—

Falls	Drowning	Burns	Septic Scratches	Electrocution	Guns	Gas	Suffocation	Other
M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
12 19	8 0	1 4	3 5	2 0	1 0	2 1	2 0	4 0
31	8	5	8	2	1	3	2	4

That is a total of 35 males and 29 females—in all 64 out of 104 all accidents.

Falls. These account for half the total number and correspond to total figures for the whole country, viz., 4,000 out of 8,000. Most cases were in old persons and mostly in the house, and at least half are preventable by the exercising of some forethought.

Drowning. This was the next largest group with me and the whole country, and was no doubt due to the fine summer. The serious aspect of the whole country's increased figure of 925 (for 1933) is the loss of young adults. One can but hope the praiseworthy efforts of various newspapers to teach swimming will tend to lessen the mortality rate.

Septic Scratches. This figure is exceptionally high—and illustrates the need for care in even trivial injuries.

Electrocution. May increase, as "familiarity breeds contempt." One case was from overhead main supply ; the other from a faulty domestic fire.

Other Group. This group includes a fall from a train, a cart accident, heatstroke, and an exceptionally rare incident of a boy being stabbed by falling on his "Scout" knife. I received great help from the Scout Association in this matter and parents and guardians will be relieved to learn that the knife in question was not of the "approved" pattern, which cannot fall out of its sheath even in tumbling about, as the one in question did, but it is always desirable that boys should only be allowed to carry the standard pattern.

Suffocation group. These two were, I regret, children in bed with parents or others.

The number of Inquests held with Jury was 59, the remaining 109 were without troubling a Jury. Over 5 years this is the average proportion of above one-third Jury to non-Jury inquests. I should like again to express my sincere thanks for the care and patience taken by the Jury and also to the various Authorities who have adopted suggestions made in Jury "riders."

Expenses incurred by the Coroner. These were £765 1s. 2d., being above the yearly average. There were, however, 27 more inquests, being the highest total since 1928, whereas last year was the lowest number since 1928.

TABLE XXXIII.
Return of Inquests held in the Administrative County during 1934.

TABLE XXXIV.

Meteorological Data, 1934.

RECORDING STATION	DETAILS SUPPLIED BY	RAIN GAUGE. Diameter of funnel: height above ground; and above sea level.	RAINFALL IN INCHES.												Average rainfall for 5 years, 1930 to 1934.
			January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	
LEWES ...	J. T. P. Johnston, Esq.	8 inches. 15 inches. 11.34 feet.	3.34 *2.67	0.24 2.77	3.58 2.69	3.22 1.09	0.43 2.00	1.69 2.57	1.83 2.11	2.72 1.94	1.78 3.91	2.64 2.36	5.51 1.20	9.77 1.05	36.75 26.36
COXLOW, HORAM ...	Miss P. C. Harrison	5 inches. 12 inches. 260 feet.	3.15 *2.47	0.17 2.04	2.90 2.51	2.36 1.14	0.47 1.35	1.65 1.60	1.31 2.33	2.12 0.99	1.53 3.96	1.87 1.97	4.26 1.42	9.03 1.07	30.82 22.85
HIGH CROSS, FRAM- FIELD.	R. L. Thornton, Esq. C.B.E.	5 inches. 12 inches. 200 feet.	2.94 *2.28	0.14 2.50	2.83 2.42	2.70 0.85	0.38 1.48	1.96 1.75	1.63 2.16	2.59 1.12	1.38 3.70	2.10 2.45	4.31 1.14	8.47 0.99	31.43 22.84
SEAFORD ...	Surveyor, Seaford U.D.C.	5 inches. 12 inches. 45 feet.	2.23 *1.87	0.12 1.79	2.87 1.69	1.64 1.11	0.37 1.43	1.36 1.74	1.10 1.06	2.14 0.81	1.09 3.63	1.98 2.42	3.64 0.88	7.25 0.88	25.79 19.31
BEXHILL ...	H. J. Sargent, Esq.	8 inches. 12 inches. 11.98 feet.	2.81 *2.10	0.13 1.60	2.35 1.84	2.12 0.94	0.50 2.81	2.44 1.43	1.00 1.09	1.65 0.97	1.79 4.22	2.19 2.42	3.47 1.41	7.24 1.05	27.69 21.88
SOUTH RIDGE, HEATHFIELD ...	P. Lennox Wright, Esq.	8 inches. 11 inches. 540 feet.	3.43 *2.59	0.24 2.76	3.48 3.10	2.91 1.29	0.64 1.62	1.95 2.33	2.39 2.75	2.93 1.32	1.67 5.33	2.24 1.67	4.25 1.59	10.27 1.16	36.40 27.51
DARVELL HALL SANATORIUM, ROBERTSBRIDGE	Dr. J. R. Dingley	5 inches. 3 feet. 100 feet.	3.57 *1.62	0.15 2.25	3.53 2.99	2.11 0.87	0.51 1.99	1.50 2.04	1.24 0.91	2.33 2.04	1.32 0.91	2.11 1.54	3.17 1.32	9.17 0.69	30.71 20.66

* The figures in italics are the records for 1933.

